



## CHAPTER IX

### DISCUSSION

The study dealt with the relevance between Community Health Nursing curriculum and Community Health Nurses' tasks assigned by the MOPH. It was also found that curriculum planning was congruent with curriculum implementation. When analysing the curriculum, we should not just look at the content or learning experience, but we have to examine all parts of curriculum.

Educational system is based on the philosophy of each institution. The philosophy of that institution should be congruent with the National goal and the need of the nation (Sayer, J.G. and Alexander, W.M 1974). This study also found that the philosophy and the educational goal of Nursing Curricula under 3 agencies (MOPH, the Ministry of University Affairs and Private Institution) are based on national goal, particularly stated in the Six National Development Plan. They have tried to produce the graduates with following characteristics: social, intellectual, and skillful to meet the social demand and ultimately to achieve the national goal (Kiereini, 1985: WHO, 1981).

From the analysis, it was found that the philosophy and the objectives of Nursing curriculum under

3 agencies are similar to each other. All believe on "pragmatism". The curriculum tends to teach the students as follows: critical thinking, solving problem, adapting themselves in changing environment, and developing the ability of using new technique and equipment for solving the client's problem. One principle of pragmatism is the reality of change (George F.K, 1971). According to the pragmatism, the instructor should construct learning situations around particular problems whose solution will lead his student to a better understanding of their social and physical environment.

The influence of "idealism" is a second basic belief which will help the learners to understand the patients' need and look after them with kindness and sympathy. All 6 institutions require their students to have good attitudes and code of conduct for the nursing profession. They are responsible for continued personnel and professional growth, support and maintain the moral and ethical values of the Thai society. Josiah Royce mentioned that the student should be taught to respect his country and the community.

The third philosophy is "realism" which emphasize the learners to utilize the theory of nursing science. While providing nursing care, the students learn reasoning to solve their problems. George F. K. (1971) said that the purpose of classical realism is to

enable the students to become an intellectually well balanced person.

Furthermore, all 6 institutions believe on "existentialism". They have allowed their students to select the elective course. It indicates that the institutions provide opportunity for students to select the subjects according to their interest (ibid).

The total credits of nursing curriculum in 6 institutions are ranked from 142-148 credits. All nursing schools under 3 agencies met the standard criteria of the curriculum structure described by the Ministry of University Affairs. All students have to learn General Education course before taking Nursing Professional Course. The subjects which have more credits in General Education are: Basic Science (6-20 credits) and Language (8-18 credits). It is necessary for the students to learn Basic Science because the students have to utilize the relevant scientific principles and theories in providing nursing care. It is also important for the students to learn Language (Thai and English) for good interpersonal relationship and good communication. They have to apply these while working with community members and health workers from other sectors. Only 2 institutions: Burapa University and Payap University provide Physical education for their students. In this point, it was thought that it was

good for the students because it helped improve their physical status and help them relax. It was believed that the man who had good physical, would have good mental status too. Payap University was the only one that managed their students to learn Mechanic of College Study. This subject is useful for the students for higher education. From this subject, the students will know the methods of learning in higher education. Nowadays, the learning in higher education is emphasizing self-directed learning (Malcolm S.K., 1975). Thus, it was useful for the students to learn this subject.

The total credits of Community Health Nursing curriculum ranged between 6-9 credits. They were 4.3-6.2% of total credits in Nursing Curriculum. When compared with other subjects such as Medical Nursing, Surgical Nursing, Psychological Nursing, and Pediatric Nursing, it was found that the credits of these subjects were equal or quite similar to Community Health Nursing. It showed that each nursing subject was playing an important role at the same level in Nursing Education Curriculum. The students should have the knowledge, attitude and skill in each branch of nursing equally. This result supports the Mullika Bhamarasuta's study (1984). This study showed that the total number of credits in Community Health Nursing in theory and practicum were quite similar. It indicated that the learning experience in practice field was as important as

learning experience in theory. All 6 institutions allocated 4 credits for practical field (except Ramathibodi Nursing School-3 credits). It was important for the students to get practicum learning experience. Nursing profession is based on arts and sciences. So the students need not only theory but also practicum. Loretton E.H. mentioned that the learning experience in field practicum was very effective because it helped the students to get the knowledge in the real situation. Moreover, it helped the students to enhance good attitude and skill in nursing profession.

Nowadays, the curriculum has been changed to community-oriented. So the nursing institutes have to manage their students to practise in the community. From the result of interview, all 6 institutions managed the students to practise Basic Medical Care (Primary Medical Care) in the community. Especially, Burapa University and Payap University allocated their students to practise in Obstetric and Gynecology Nursing in the community level by home visiting.

The relevancy of Community Health Nursing Curricula (in curriculum planning and curriculum implementing) was discussed in accordance with Community Health Nursing Tasks as follows:

Maternal and Child: every institution tended to emphasize the nursing service to individual, family and community. In particular, three institutions: Bangkok Nursing College; Chonburi Nursing College and Christian Nursing College emphasized the following aspects: to assess health problem, and to provide nursing care to mother and child. Bangkok Nursing College and Chonburi Nursing College mentioned about maternal and child care in the content. They introduced community from the first year. The other institutions (except Burapa University) allocated Community Health Nursing subject in the third and fourth year, so that the students could acquire the knowledge in Obstetric and Gynecological Nursing, and applied it in the community.

The students of Burapa University learned Community Health Nursing in the first year but it did not emphasize Maternal and Child care. If the students encountered Maternal and Child problems, they had to search for solutions with the help of teachers. The students had no background about Maternal and Child, therefore, they also needed close supervision from the teachers. The teacher-student ratio was 1:11. Every institution also managed the students to get these experiences in Obstetric and Paedriatic Departments. It indicated that the students got learning experiences in Maternal and Child. Only one activity of Payap

University, visiting pre-school children, should be improved to meet the experts' standard (table 22). It may be due to the unavailability of pre-school children, or the teachers' inadequate emphasis on this activity.

Immunization: Only two nursing schools: Christian Nursing College and Payap University set the objectives and assigned their students to learn immunization in Community Health Nursing. While other 4 institutions: Bangkok Nursing College, Chonburi Nursing College, Ramathibodi Nursing School and Burapa University allocated the students to learn in other departments. For learning experiences, every institution did well for teaching immunization to the students. The immunization service to school-children in Ramathibodi Nursing College did not reach the experts' standard. There may be some problems so that they did not meet the experts standard. The problems needed to be investigated.

Family Planning: Only Payap University set Family Planning in the Community Health Nursing. Other 5 institutions allocated Family Planning subject in Gynecological Nursing. Regarding the learning experiences, the students got all learning experience about Family Planning. It showed that the experiences provided to students met the experts' standard. From this study, it was found that the students got the learning experiences in Family Planning both in Community Health

Nursing and Gynecological Nursing. It meant that family planning was well integrated in the two fields.

School Health: All nursing schools allocated school health in Community Health Nursing. Many activities of school health program in Payap University did not meet the experts' standard. From the analysis of interview, it was found that the problem was related with time schedule. It meant that, the instructor had to revise the schedule for School Health programme. The second reason; Payap University was a private institution. For the practical field, it needed some help from the hospital. The hospital was not under the Payap University. Thus Payap University had to co-operate and co-ordinate with the hospital personnel. For this situation, the instructors supervise the students only but they did not assign them to specific tasks. The students were assigned by the hospital staffs. Because of this situation, most of the time the students did not achieve learning objectives. This problem may be eliminated by mutual understanding and then creating suitable teaching and learning environment according to educational objectives.

Nutrition: All 6 institutions mentioned nutrition in Nursing curriculum. For learning experiences, the instructors in 6 institutions managed to provide learning experiences in nutrition to students



up to the standard. Only one activity of Ramathibodi Nursing School was lower than experts' standard, that is demonstration on supplementary food. The first reason for this might be the lack of adequate time for the students to practice. The second reason might be that the community did not think they required supplementary food. So they were not interested in this activity.

**Mental Health:** Every institutions mentioned that Mental Health was taught in Psychiatric Nursing and not in Community Health Nursing. It means that only the knowledge and experiences taught in Community Health Nursing period was not enough for the students to work in the community. The knowledge from other subjects are also essential to function as a nurse in a community. community.

**Primary Health Care:** Every institution emphasized community diagnosis. Nowadays, Community Health Nursing generally emphasizes nursing service to family and community. The direction and the character of nursing service is based on health problems, health need and ability of the people to solve the problem (Ruth B. F., 1970). All 6 institution managed their students to practise these activities (community diagnosis and PHC) in the community. Chonburi Nursing College, Ramathibodi Nursing School, Burapa University and Payap University managed their students to practise in rural area while

Bangkok Nursing College and Christian Nursing College managed their students to practise in urban area. From this study, it was found that Bangkok Nursing College needed improvement in implementing the plan, and evaluation (Table 28). This may be due to large number of students (about 142 in each year). It is difficult for them to manage for all students to fulfill all experiences. For example, some students did not get learning experience in school health because the school were closed at the time of their rotation to Community Health Nursing. The instructors tried to arrange for the students to cover the activity in school health programme. The instructors assigned them to comeback for school health programme from another practice area. Because of this practice, the students might not get adequate experience in a particular assigned field if they went for school health programme while assigned to other subject areas. For this reason, the administrators and the instructors had to realize and solve the problem. Other practice items like education to promote drinking save water and environment sanitation of Bangkok Nursing College were also lower than experts' standard because the learning experiences were placed in the urban areas where sanitation and water supply were good. In this situation, the students might not get adequate experiences related to these activities.

**Health Education:** From this study, we found that every institutions emphasized Health Education. They managed well for health education activities. Nowadays, health services generally emphasize prevention and promotion more than curative and rehabilitation. Health education is one of the good methods in prevention and promotion of health.

**Supervision and Training:** Every institution mentioned about communication and team cooperation in their curriculum. It supports Mallika Bhumarasuta's study (1984), in which she mentioned that cooperation was essential among health personnel to solve health problems. The contents of Supervision were set in the curriculum by all institutions while contents of Training were not included in the curriculum of 5 institutions. Burapa University included Training in Elective Course. It meant that some students learnt if they selected the subject while some students did not learn if they did not. It is suggested that the administrator and the instructors should add learning experience in this topic. Although, it is difficult to set this activity in field practice. The instructors can teach only the theory. After graduation, if students have to do this activity, they can apply the knowledge to use in the real situation. In contrast, if they have to do training but they have not had any background in this topic, it will be difficult for them to make decision and manage this

activity. Kramer (1981) also mentioned that the function of the nurses who worked in the community were administrator, supervisor, trainer and provider of health service. The students in 5 institutions (except Chonburi Nursing College) did not get learning experience in Supervision and Training. Because the instructors cannot manage these activities by themselves. Students' experiences depended on whether health personnel at the training sites arranged activities to fulfil the learning objectives or not. Therefore, students experiences might be haphazard and varied according to chance.

From this study, we found that Chonburi Nursing College managed all learning experiences adequately enough for students to reach experts' standard. Chonburi Nursing College allocated 1 month residential community field for the student while other institutions have assigned only 2 weeks for field study, and only during the day time (8.00-16.00).

This study revealed that the learning experiences in field practicum of 6 institutions were significantly different ( $p = .000$ ), except health education. Whether the institutions were under MOPH, the Ministry of University Affairs or private institution played an important role in the differences in 7 out of 9 activities (except PHC and Health Education). From the study

result, it was noted that the institutions under all 3 agencies (MOPH, the Ministry of University Affairs, Private institution) focused on PHC and Health education activity. It indicated that, although the students studied in different nursing schools under different agencies the learning experiences in PHC and Health Education were quite similar for all. This is good because PHC is the strategy to attain the social target of health for all by the year 2000 (Kiereini, 1985; WHO, 1981). Health education is also a good method of health service for prevention of disease and health promotion. It was also found that the Supervision and Training activity of the nursing school inside and outside Bangkok was not significantly different. It was very likely that instructors had no control over these activity themselves. It depended on chance and the health personnel or the staffs in that center.

There was a statistically significant difference between the answer of the instructors and the students in Ramathibodi Nursing School and Burapa University in Nutrition ( $p = .026$ ) and Immunization ( $p = .017$ ) respectively. From this study, the answers of the instructors were higher than students' answers. So the instructors have to realize that. When we set the learning experiences to the students, we should ask how many percents of the students get these experiences.

In drawing a conclusion, it is important to consider not only statistical significance but also the " educational importance " of the data. In many instances, when the sample is too small, we may observe no statistical significance eventhough appreciable difference between groups could be seen. On the other hand, too large sample might lead to statistical significant test while the actual difference between groups might have no " educational importance ". In other words, the differences between groups might be too small to lead to any change in educational decisions despite statistical significance.

The magnitude of educational importance (clinical importance) between students' and instructors' perceptions of actual learning activities is summarized in table 38.

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Table 38: The magnitude of educational importance between the students' and the instructors' perceptions of actual learning activities in accordance with CHN tasks in various nursing school.

Educational importance	MCH	Immu- nization	Family Planning	School Health	Nutrition	Mental Health	PHC	Health Education	Supervision & Training
1. Bangkok NC. -Mild	1.27%	no diffe- rence.	5%	14.2%	13.39%	.05%	15.49%	6.63%	22.14%
-Moderate									
-High									
-Very high									
2. Chonburi NC. -Mild	no diffe- rence.	7.57%	13.87%	11.32%	15.67%		no diffe- rence.	no diffe- rence.	28.49%
-Moderate									
-High						72%			
-Very high									
3. Ramathibodi NS. -Mild	4.11%	22.35%	22.36%			6.07%	13.21%	4.11%	3.78%
-Moderate				28.30%	35.46%				
-High									
-Very high									
4. Burapa U. -Mild				6.30%			8.26%	6.30%	16.93%
-Moderate	37.34%	42.08%	12.41%		27.95%				
-High									
-Very high						94.44%			
5. Christian NC. -Mild	2.2%	2.2%	2.2%	7.13%	no diffe- rence.		no diffe- rence.	2.2%	
-Moderate									29.31%
-High						60.43%			
-Very high									
6. Payap U. -Mild	16.37%	1.49%	14.40%		20.91%	6.36%	12.39%		
-Moderate				36.69%				35.70%	27.80%
-High									
-Very high									

REMARK: mild importance = 0.1% - 25%, moderate importance = 25.01%-50.00%,  
high importance = 50.01% - 75.00%, very high importance = 75.01 - 100%

From the magnitude of educational importance (clinical importance), it was found that for some items, the differences between groups might have educational importance even though statistical tests were not significant (Table 32-37 and table 38). For example, the difference in the students' and instructors' perception in Mental Health activity in Chonburi Nursing College, Burapa University, and Christian Nursing College was 72%, 60.43%, and 94.44% respectively while the result (of statistical test) showed no significantly different. On the other hand, the difference in students' and instructors' perceptions in Nutrition activity in Ramathibodi Nursing School was only moderately important eventhough the result (of statistical test) was significantly different. The differences between statistical significance and educational importance deserve more studies. Any change in measures to improve education parameters will be relevant only when both educational importance and statistical significance are considered.

From this study, it was found that the nursing schools varied according to the extent to which they implement learning theory in Community Health Nursing. Ideally, nursing schools should apply the principles of learning in curriculum development as much as possible. It was clear that there were rooms for improvement for many schools. Current deficiencies might be from many



factors such as number of students, number of instructors, the amount of content, time limitation, facilities and also instructors' experiences. We found that Burapa University managed their teaching-learning in theory and practice according to the principle of learning very well, eventhough the ratio of the instructor:student is 1:11. From the interview, the instructors tried to implement the curriculum according to the plan outline in the course syllabus of Community Health Nursing. The other 5 institutions (except Burapa University) should improved in Active Student Participation in theory part ( $\bar{X}$  ranked between 1.76-2.28). Nowadays, the method of teaching has been changed from passive learning to active learning. The five institutions also need improvement in Formative Evaluation ( $\bar{X}$  = 0.818-2.63). Formative Evaluation is very important in nursing education. Scheer and Grebby (1976) mentioned that the assessment should be do continuously. The instructor can use the evaluation result to improve teaching strategies. Meanwhile the students can use the test result to improve their learning activity. Four institutions: Bangkok Nursing College, Chonburi Nursing College, Ramathibodi Nursing School and Payap University needed improvement in Feedback by Students. Feedback by Student is the way to improve students's learning. It is also the feedback to the instructors. In practice field, the instructors in 6

institutions have managed well in 3 items out of 4, especially Feedback by Instructor. In practical field, the instructor are like resource person and have to support, suggest, demonstrate good nursing skill (Windsor, 1987; Schumann, 1990). It is good for the practice field which will help the students to gain more knowledge, skill and also good attitude to work in the community.

The instructors' opinion and students' opinion toward teaching-learning condition were significantly different in each school as already shown in table 14. Most of the results showed that the instructors had to know what he offered to the students and how much they responded to that activity. At the same time, the study result is the feedback to the instructors. The instructor may utilize the study results to improve their teaching strategies.

The magnitude of educational importance between the students' and the instructors' opinions towards teaching-learning condition is summarized in table 39.

Table 39: The magnitude of educational importance between the students' and the instructors' opinion towards teaching-learning conditions in various nursing school.

Educational Importance	THEORY					PRACTICE				
	Motivation	Teacher Center	Active Student Participation	Formative Evaluation	Summative Evaluation	Feedback by Student	Motivation	Active Student Participation	Feedback by Instructor	Feedback by Student
1. Bangkok NC.										
-Mild	12.16%	10.70%			24.14%			18.78%		
-Moderate			41.58%	31.89%		29.01%	32.23%		33.15%	40.59%
-High										
-Very high										
2. Chonburi NC.										
-Mild						18.07%	12.61%			
-Moderate				28.42%				27.38%	36.00%	61.15%
-High										
-Very high			very high							
3. Ramathibodi NS.										
-Mild				23.50%						24.86%
-Moderate	40.26%	38.69%	36.87%			42.24%	45.94%	28.12%	32.72%	
-High										
-Very high					56.95%					
4. Burapa U.										
-Mild				16.17%	4.64%	24.25%	21.48%	1.66%	15.71%	
-Moderate	32.71%		44.71%							32.71%
-High		54.09%								
-Very high										
5. Christian NC.										
-Mild	21.48%		12.79%	12.34%	18.19%					
-Moderate						37.80%	37.81%	36.34%	40.13%	36.86%
-High										
-Very high		very high								
6. Payap U.										
-Mild			19.6%	1.96%	9.14%			9.14%		
-Moderate	40.20%					36.12%			44.30%	33.71%
-High										
-Very high		77.30%					69.50%			

REMARK: mild importance = 0.01% - 25.00%, moderate importance = 25.01% - 50.00%  
high importance = 50.01% - 75.00%, very high importance = 75.01% - 100.00%

From the result, it was shown that some items of the differences between groups might have educational importance eventhough statistical tests were not significant (Chonburi NC.- item Feedback by Student in practice; Ramathibodi NS.-item Summative Evaluation; Christian NC.and Payap U.- item Teacher Center) On the other hand, it was shown that the difference in students' and instructors' opinion towards teaching-learning conditions was only moderately important eventhough the statistical tests were significantly different (Bangkok NC.- items Active Student Participation, Feedback by Student in theory and Feedback by Instructor and Feedback by Student in practice; Ramathibodi NS.- items Feedback by Student in theory, Motivation and Feedback by Instructors in practice; Christian NC.- item Feedback by Instructors in practice; and Payap U.- item Feedback by Instructor in practice. It was also found that the difference between groups was highly important and statistical tests were also significant (Chonburi NC.- item Active Student Participation in theory and Payap U.- item Motivation in theory). The differences between statistical significance and educational importance deserve more studies. Any change in measures to improve education parameters will be relevant only when both educational importance and statistical significance are considered.

## CONCLUSION

The study analysed the relevancy of the Community Health Nursing in accordance with the Community Health Nursing tasks assigned by the MOPH. The study showed that the philosophy and educational goals of all 6 institutions intended to produce graduates to be socialable, to be knowledgeable, and to possess sufficient skills to attain the national goal of health for all. Community Health Nursing curricula needs to be integrated with other subjects because the Community Health Nurses have complex role. Curriculum planners have to integrate community health nursing in every branch of nursing such as Gynecological nursing, Obstetric Nursing, Psychiatric Nursing, etc. The study revealed that the 6 institutions allocated the students to get some learning experiences in other Department such as Mental Health activity. It was also found that, every institution has managed the learning experience Community Health Nursing relating to the Community Health Nursing tasks (except Training). Eventhough 5 institutions (except Chonburi Nursing College) managed some actual learning experience but some of the activities did not reach the experts' standard. From this study results, the administrators and the instructors have to examine the reason of these problems and improve

these activities which are lower than experts' standard. It is suggested, the administrators and the instructors may add or integrate the content of training and learning experience in the related subject to fulfil the tasks of the nurse who work in the community. The study showed that the nursing schools under 3 agencies were significantly different in learning experience setting (except PHC and Health Education). The conditions of teaching-learning in 6 institutions were also statistically different. Agencies played an important role for differences. Locations of the institutions also had an effect on the differences in 6 items out of 10 principle of learning items. The opinions of instructors and students in 5 institutions (except Burapa University) toward teaching-learning conditions were significantly different in some items. Suggestion are made for further study to find out the number of the nurses who work in the community after graduation and evaluate the competence of these nurses.

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