

FACTORS AFFECTING NURSES' LIFELONG LEARNING

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Abstract

Introduction: A versatile pattern directs the desire for participation in lifelong education. It is designated with a combination of internal and external factors.

Purpose: The purpose of this review is the study of factors affecting health professionals' attitude, and specifically of nurses, in attending lifelong education courses.

Methodology: This paper includes a scrutinized search of review and research studies conducted internationally as well as in Greece while they focus on outlook about continuing nursing education and lifelong learning. The sources of the review were mainly found via electronic Greek and International databases such as Google Scholar, Mednet, Pubmed, Medline and the Hellenic Academic Libraries Link (HEAL-Link).

Results: Nurses' knowledge and skills are to be continuously updated. Given that the core of nurses' activities focuses on the people, investments in continuous training are essential to the ability of nurses within organizations. The nursing research investigating the professional nursing behavior, indicate that lifelong learning is a key component of nurses' professionalism and can act as an organizational element of nursing.

Conclusions: Although lifelong professional development is not a new concept, it is not well understood in certain health fields, especially in nursing. This may be due to the ad hoc process of lifelong professional development, with countries around the world passing different laws concerning lifelong learning.

Keywords:

Nurses, Lifelong learning, Continuing Nursing Education.

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Introduction

The term "lifelong learning (or education)" refers to a philosophical concept whereby education is considered as a long-term process that starts from the human birth and continues throughout life. This term covers all kinds, types and levels of education, typical and untypical. [1]

The desire for participation in life-long education is directed by a versatile pattern, determined by a combination of internal and external factors. The widespread nurses' attitude either personal or unanimously towards continuing nursing education is affected by versatile factors that are shaped by the existence of incentives that direct the attempts and efforts to complete the desired objectives with different vigor and enthusiasm. [2]

Cross presents satisfactorily an integral awareness model on lifelong learning (1981). The model argues that an algorithmic sequence of interactions resulting from the nurse's constant self-criticism and self-evaluation leads to the mood formation and behaviour for participation in life-long learning. Moreover, according to the model, from the beginning to the completion of the algorithm, there is an interaction of goals and expectations, encouraging and enforcement agents, personal and family milestones (e.g., deaths, family members pregnancy, promotion, taking up new duties, etc) that may impact either positively or negatively the decision for taking part in or commitment to the completion of the learning program [3] One of the fundamental requirements for participation in life-long nursing education is the awareness of nurses about their personal responsibility to bear professional obligations, as defined by the code of ethics for nurses [4]. It is essential the necessary and required training sources be available to nurses to meet these needs.

The purpose of this review is the study of factors affecting the decision of health professionals, and specifically nurses, in attending lifelong education courses.

METHODOLOGY

It was held a scrutinized review of scientific studies conducted internationally as well as in Greece focusing on attitudes about continuing nursing education and lifelong learning. The review sources were mainly found through electronic Greek and International databases such as Google Scholar, Mednet, Pubmed, Medline and the Hellenic Academic Libraries Link (HEAL-Link). The key words used were nurses, lifelong learning, and continuing nursing education. The language of the studies was the exclusion criterion apart from Greek and English. The most articles and studies used were accessible to the authors.

CHALLENGES AND SUPPRESSING AGENTS REGARDING NURSES' PARTICIPATION IN LIFELONG LEARNING PROGRAMMES

Lifelong learning includes planned learning experiences that lead to nurses improved behavior, skills and knowledge; consequently, it leads to promotion of function and nursing care plan in society [5]. Seminars, workshops and conferences provide an opportunity for continuing professional development and empowerment [6].



Nurses' knowledge and skills should be constantly updated. Given that the core of nursing activities focuses on people, investment in continuing education is essential for nursing capacity within organizations [7]. Nursing studies investigating nurses' professional behavior indicate that lifelong education is a key component of nurses' professionalism and can function as an organizational component of nursing operation [8]. The American Medical Institute claimed that competent and educated nurses should be trained to secure the future of the nursing profession. Obviously, skilled nurses promote the quality of services provided, so it is important to clarify the obstacles and challenges of nursing education [9].

The results of the research held by Eslamian, Moeini, & Soleimani (2015) showed that the challenges associated with lifelong nursing education can be grouped into five themes [10]:

- Factors related to nursing trainees
- Factors related to teachers
- Factors related to educational processes
- Insufficient facilities
- Incomplete evaluation.

In relation to learner-related factors, Eslamian, Moeini, & Soleimani (2015) report that preparation for learning was one of the main concerns of the participants. The main repressive factor mentioned by the participants in preparing for the follow-up of lifelong learning programs was the inability to concentrate during the teaching process and their presence in the classroom due to their current professional and family obligations. [10] The same conclusion was reached earlier by Mohamadi & Dadkha (2005), in a descriptive study evaluating continuing education in terms of nursing staff, where 28.2% of nurses were dissatisfied with the timetable of training programs, which is due to the tiredness of the training hours owing to their working hours during the training programs as well as their family responsibilities. They suggested particular working hours be applied to serve employees appropriately while attending lifelong learning programs. [11]

Regarding students' motivation to learn and attend educational courses, Eslamian, Moeini, & Soleimani (2015) found out that when educational courses were held in the workplace, nurses were able to have active learning activity and seemed to have reported less repressive factors. However, the researchers themselves report that research participants reported that in this interactive type of training, compulsory attendance in conjunction with compulsory overtime and family responsibilities were among the factors that reduced their motivation to participate. [10] Farmani & Zaghimi-Mohamadi (2009), in an earlier descriptive cross-sectional study investigating nurses' attitudes on continuing education, showed that when training programs impeded less of the trainees' professional and family tasks, it is obvious that when training programs impede to a lesser extent the trainees' professional and family duties, nurses may have higher incentives to attend courses. As a result, it leads to quality improvement and effectiveness of continuous education courses. [12]

Concerning the lack of human resources, the participants believed that the lack of nursing staff is a factor affecting the voluntary staff participation in training programs. Thus, when staff compulsorily attend courses while performing their job duties, learning courses do not produce the desired results [12]. Chong et al. (2011) showed that the small number of nurses and the lack nurses in workplaces cause a

time constraint that is one of the challenges of continuing education. Lack of workforce is one factor that can affect other aspects of nursing work in particular. [13]

The high cost of tuition fees for lifelong education programs has prevented many nurses from seeking participation in continuing nursing education. In particular, financial constraints due to lack of funding and personal costs have been a major obstacle [14] Kovner et al. (2012) identified costs as a key resource for pursuing additional education. The authors reported that a nurse could continue his continuing education if he was willing to retain another job or work voluntarily overtime in order to earn a higher income. [15]

Computer and internet access in the workplace is also considered important for the follow-up of online continuing education courses. According to the literature, it is suggested that the lack of technical support at work was seen as an important obstacle for nurses to point out that equipment and software for continuing education nursing education is constantly changing and evolving [16]

Fairchild et al. (2012) in their research report that the most important barriers to accessibility and therefore, participation in continuing education programs for nurses include geographical distance or isolation, lack of perceived administrative, financial and / or technological resources and support, lack of time due to workload, lack of staff, inadequate staffing and / or distance travelled, lack of relevance to continuing education issues, and lack of specialized training staff in the hospital setting work, especially in district hospitals. [17] Delayed awareness of educational programs, higher requirements for entry into nursing education programs and lack of knowledge about learning opportunities are also hampering the pursuit of continuing education [18].

Personal factors that may be included in the repressive factors regarding the intention to attend continuing nursing education programs have also been a coherent issue mentioned in the literature on continuing nursing education [18]. One of the main reasons cited by nurses as a repressive factor, is family obligations such as caring for children or their dependent members (e.g. parents of senior citizens, etc.), since caring for their family members and lack of other support mechanism are also obstacles to finding time to pursue continuing education programs, especially for those who have to travel long distances to attend learning courses. [18] The participant's personal energy, mood and motivation are mentioned for they consist both motivating factors and obstacles and are also associated with the self-efficacy regarding continuing nursing education [18].

Incentives for nurses' participation in lifelong learning courses

The reasons that have necessitated continuing nursing education are due to the extensive changes affecting nursing, economic, social and political change, health industrialization, globalization, the diffusion of technology and the accumulation of new scientific knowledge and multidisciplinary need for the provision of quality nursing care to patients [19].

There is a lot of evidence that increasing the skills and knowledge of nursing staff is associated with improving various indicators of care quality, including reducing the incidence of hospitalization errors, hospital infections. They could improve patient's safety and staff productivity and reduce work stress and burnout [20]



Nurses attend lifelong nursing education for personal, professional and organizational reasons [21]. Nurses' motivation for lifelong learning and participation in continuing nursing education programs is influenced by personal experiences and shaped by free will but also by intrinsic motivation and external factors. All of these factors create a framework within which the individual defines his or her goals.

Motivational orientations or motivations can be grouped into five categories [21]:

- Professional development and involvement,
- Professional service,
- Learning and interacting with colleagues,
- Personal benefits and job security,
- Professional commitment

Another categorization system classifies incentives according to health professionals' attitude to [21]:

- Target-centric (in line with the goals they expect to achieve through the training program),
- Networking and social activity (seeking social relationships),
- Learning-oriented (acquiring new knowledge)

The most obvious of these factors are professional improvement, knowledge and skills improvement and, ultimately, personal benefits. The survey also demonstrated the need for nurses to update their knowledge through continuing nursing education. According to the research of Kavga et al. (2012), which used the Participations Reasons Scale (PRS), nurses' main concerns are information on health care developments and the acquisition of new professional knowledge. [22] Earlier research by Bolte & Presler (1983) claim that the majority of nurses report that increasing skills and knowledge is the benefit of continuing nursing education, while in other studies, researchers have found that updating information is one of the most important players in continuing nursing education [23,24]

Planning and designing lifelong learning programs

Concerning programming, the study by Zargham - Boroujeni et al. (2013), showed that lack of staff for accurate planning of education and lack of consideration of trainees' attitudes are among the educational challenges. [25] Arslanian-Engoren, Sullivan & Struble, (2011) also reported that overloading programs with extra work is one of the educational challenges. Increased overload of school work can disrupt the planning of educational programs. Furthermore, it is an important repressor for nurses' participation in continuing nursing education programs. [26]

Farzi, Shahriari, & Farzi (2018) stated that nurses' views are mostly disregarded in planning, and therefore, it can be noted that educational courses implemented in the context of continuing nursing education that they do not cover their needs regarding clinical practice. [27]

The findings of Ghasemi-Emamzade, Vanaki & Memariyan (2004) showed that the mean and degree of standard deviation of nursing care quality in relation to nurses' treatment notes, patients' clinical status, quality of care provided and quality patient education increased in both the control group and the test group, with the results of the second one showing a more significant increase than that of the control group. In the aforementioned study, the training was fully adapted to the needs of the nurses according to their specialty and the department in which they were working. As all the staff involved in the programming, it can be noted that the number of designers was higher than usual. [28]

The need for appropriate vocational education, especially for clinical learning, was an important issue for nurses. Currently, there is a shortage in continuing education courses that include material for different forms of learning [29]

Kataoka-Yahiro, Richardson & Mobley (2011) also emphasized that appropriate continuing nursing education should include consideration of the different learning strategies observed between different generations of nurses, e.g. the younger generation of nurses is more familiar with online education than the older ones. Research also points to the need for nurses to participate in continuing education programs that are exciting and make learning enjoyable and attractive. [30]

The evaluation of participants in continuing nursing education courses is also important and should be properly planned when designing educational programs. The study conducted by Aminoroaia et al. (2014), explained that participants showed a preference for periodic evaluation, accurate monitoring of evaluations, measuring educational effectiveness, and knowledge testing both before and after the completion of the training program. [31]

Continuous professional development also offers nurses the opportunity to "maintain, improve and expand their knowledge, expertise and develop the personal and professional qualities required throughout their professional lives" [32]. In many countries, constant investment in maintaining the most up-to-date and documented knowledge to ensure the proper provision of qualitative modern health care is seen as a fundamental ethical obligation for all health workers and especially nurses [33].

CONCLUSION

Although lifelong professional development is not a new concept, it is not well understood in some health professions, especially in nursing. This may be due to the ad hoc process of lifelong professional development, with states and countries worldwide having different laws on lifelong learning. [34] In some countries, nurses are required to attend specific lifelong learning and development programs in order to obtain specialized qualifications to carry out their professional duties (e.g. Mental Health Nurses). However, the majority of countries worldwide do not subject nurses to mandatory attending of such programs. For this reason, there is no corresponding global legal framework requiring mandatory compliance by all States [35].



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