

The Challenges Lived and The Lessons Learned Teaching Nursing in Cambodia

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Once upon a dare.....



Cambodia is a poor country in Southeast Asia with 80% of 14.4 million people surviving as sustenance farmers.

(Cambodian Ministry of Health [MoH], 2011)

Cambodian health remains the lowest in the Western Pacific Region and ranks 174th out of 190 countries.

(World Health Organization [WHO], 2010).

Only 12% of Cambodian homes have electricity.

(US Ambassador Todd, Interview, 2012)



Population: 14.9 million

Average Age: 23.3 years

Infant Mortality:

55 deaths/ 1,000 births

Maternal Mortality:

250/ 100,000

Life Expectancy: 62 years

(Central Intelligence Agency [CIA], 2012)

Countries in SE Asia	Number Physicians	Number Nurses
Cambodia	.16/ 1,000	.61/ 1,000
Vietnam	1.22/1,000	1.01/ 1,000
Laos	.27/1,000	.97/1,000

Source: World Bank, 2010



Killing Cave used by Khmer Rouge, Kampot





Non-communicable Disease Burden:

Urban Areas:

10% of adults have diabetes

25% high blood pressure

Rural Areas:

5% of adults have diabetes

12% hypertension





Cigarette Use:
48% of men
3.6% of women

Chewed Tobacco Use:
17% of women
1% of men



- ❖ Land mines and road accidents are the most significant causes of traumatic injury and death in peacetime Cambodia.
- ❖ Land mines are particularly serious for children and youth who attempt to salvage unexploded ordinance to sell it as scrap metal (UNICEF, 2009).



Traffic Fatalities

Second Leading Cause of Death



The Health System: Starting Over

1979:
20 physicians (45)
26 pharmacists
28 dentists
728 medical
students
20 nurses



The Health System: 1995- Present

Level 1: Operational Districts Serving

100,000 - 200,000 pop

Referral Hospital & Network of Health Centers

Level 2: Provincial Hospital & Provincial Health Department

Level 3: Ministry of Health, National Institutes, National Hospitals, National Programs, & Training Institutions

8 National Hospitals

73 Operational Districts

67 Referral Hospitals

823 Health Centers



Dormitory in Kampot



TSMC, Phnom Penh



Kampot RTC

There are 5 public nursing programs in Cambodia:

- Technical School for Medical Care
- Kampot RTC
- Stung Treng RTC
- Battambang RTC
- Kampong Cham RTC

RTC = Regional Training Center



Cambodian Nursing Education System

- ❖ **Bachelor's Degree – 4 years
(only TSMC)**
- ❖ **Secondary Nurse- 3 years**
- ❖ **Primary Nurse- 1 year**
- ❖ **Secondary Nurse Midwife- 3 years**
- ❖ **Primary Midwife- 1 year**
- ❖ **Secondary Nurse/ Midwife- 3 + 1 (not
Stung Treng RTC)**
- ❖ **Secondary Nurse/Dental Nurse- 3 years
(only Kampong Cham RTC)**



Cambodian Nursing Classroom Resources

(Sources: Direct Observation, Cambodian Interviews, & JICA)

- ❖ **Out- dated libraries in 4 of 5 nursing programs. Stung Treng has no library.**
- ❖ **3 of 5 programs have equipment in poor condition. TSMC and Kampot RTC have best maintained equipment. Faculty are not permitted to use equipment in some programs and/ or faculty lack knowledge of use.**



Cambodian Nursing Classroom Resources

(Sources: Direct Observation, Cambodian Interviews, & JICA)

- ❖ **Nursing lab (demonstration room) in 4 of 5 nursing programs; however, Battambang RTC has their nursing lab on the roof. Stung Treng has no nursing lab.**
- ❖ **Typical classroom size: 90-122 students in room**
- ❖ **Typical classroom: long and narrow; overcrowded**

Challenges:

The Ministry of Health oversees the funding, staffing, and content of the five regional training centers that provide a three year nursing program.

- ❖ No nationally specified terminal program outcomes.
- ❖ There is program inconsistency on the subject matter taught.
- ❖ Faculty lack baccalaureate or advanced nursing degrees and academic preparation in education principles associated with course construction, teaching methodologies, and evaluation.



Cultural Considerations

"Culturally congruent" education is education that is "provided in a manner that is meaningful and useful". (Orane, 2006).





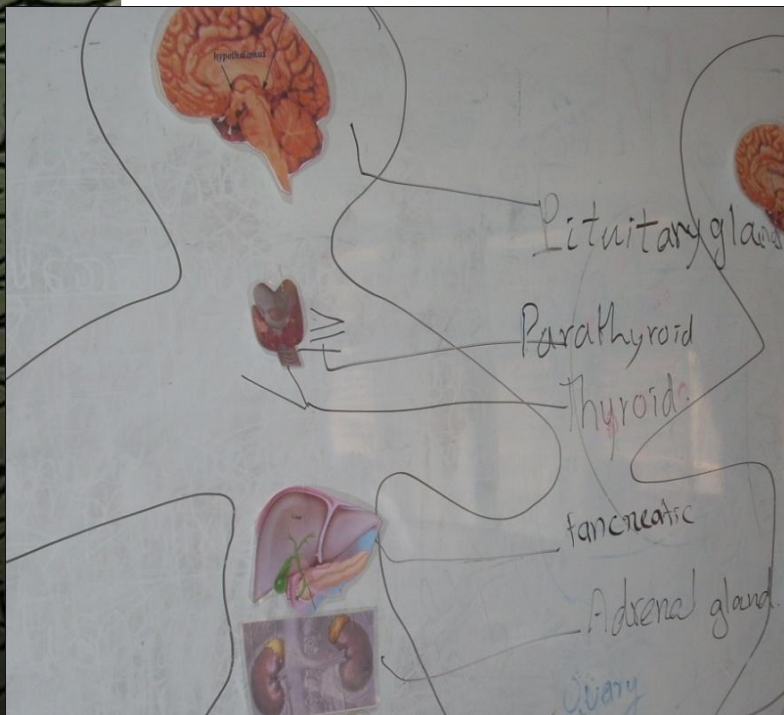
Nursing education must be presented with the local cultural, religious, economic, social environmental and political influences in mind (Murray, 2005).

Challenge: *Rules of Propriety and Attitudes About Time*





- ❖ Do I move my hands, arms, body location?
- ❖ Use of touch?
- ❖ Meeting/ Greeting
- ❖ Gaining Attention
- ❖ Giving Praise
- ❖ Emphasizing
- ❖ Giving Correction



A group of students in a classroom setting, standing near a whiteboard. One student is pointing at the board, which has handwritten notes. The students are wearing white shirts and dark skirts.



Teaching Methods

- ❖ Work sheets and color pencils
- ❖ Teams were used to develop nursing care plans/answer case study questions
- ❖ Games, such as *Jeopardy*, to encourage learning and promote active interaction.
- ❖ Donors provided pen lights, ink pens, clips, tote bags and candy for prizes and gifts.



*Same- Same,
but Different!*

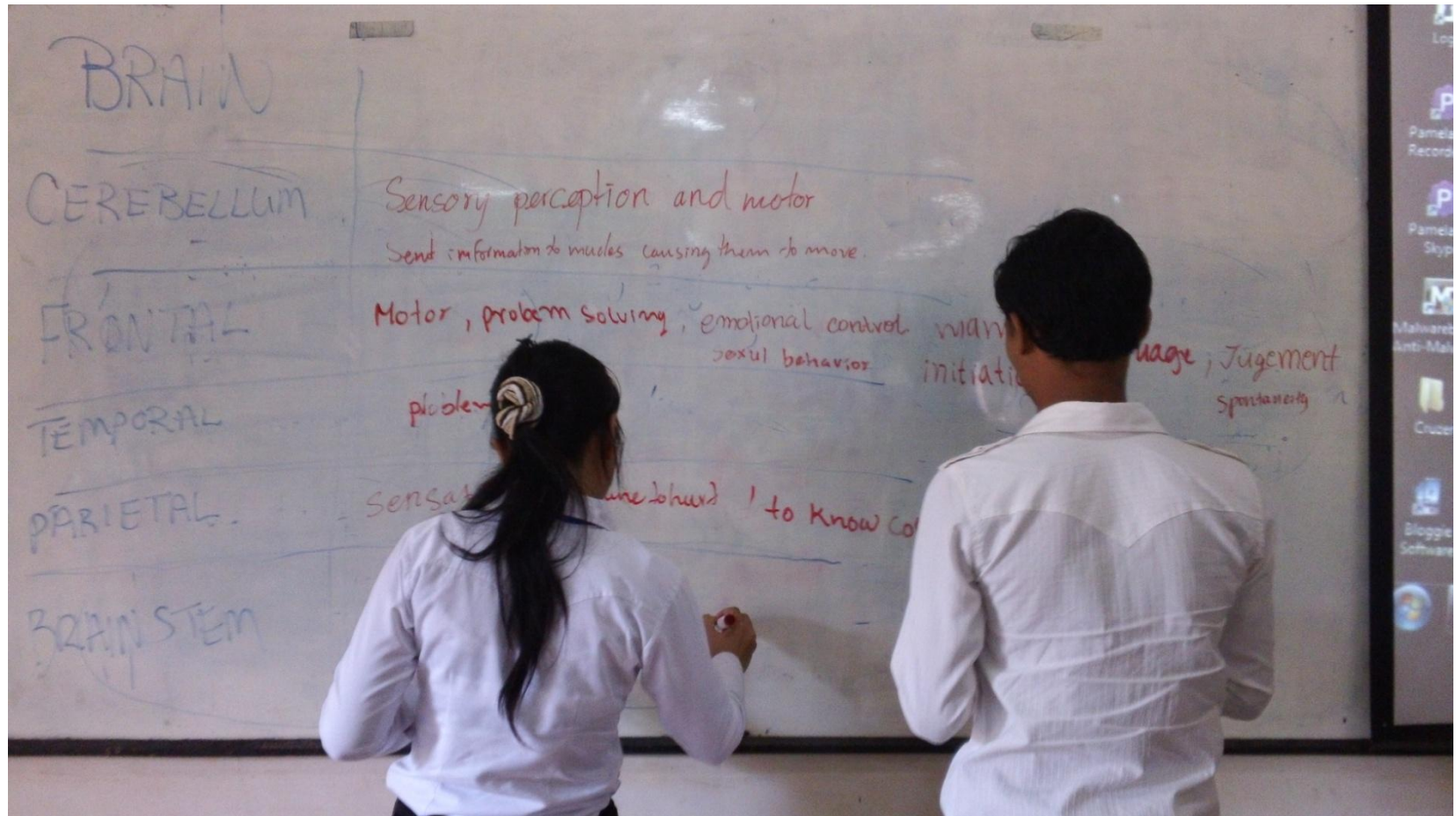


- ❖ Use of Stories
- ❖ Preparing Outlines
- ❖ Be Clear and Culturally Alert
- ❖ Make Lecture Information Personal
- ❖ Invite Listener Questions





- ❖ Use Illustrative Examples
- ❖ Simplify the Vocabulary
- ❖ Repeat & Summarize Carefully
- ❖ Repeat and Repeat Again
- ❖ Break up Lecture w/ Demonstrations & Breaks







Challenges for Cambodian Nursing Education

- ❖ Lecture plans are not based on evidence, are not scientific, and are poor in quality.
- ❖ Faculty lack appropriate teaching knowledge and skills.
- ❖ Faculty do not supervise students in clinical setting
- ❖ No mentoring of nurses in provincial hospitals on how to supervise nursing students
- ❖ Nurse: Student Ratio in clinicals 1:20-35
- ❖ No incentive for nurses to supervise nursing students.

English Language & Cambodian Nursing Faculty

(Sources: Cambodian Interviews- 2012 & Japan International Cooperative Agency- 2011)

- ❖ Nursing Programs were asked to self-report English speaking skills of faculty to JICA.
- ❖ 3.4% Very Good (N=3)
- ❖ 89.7% Good (N=78)

Direct experiences at all 5 nursing programs found a very different situation. (11/1/6)

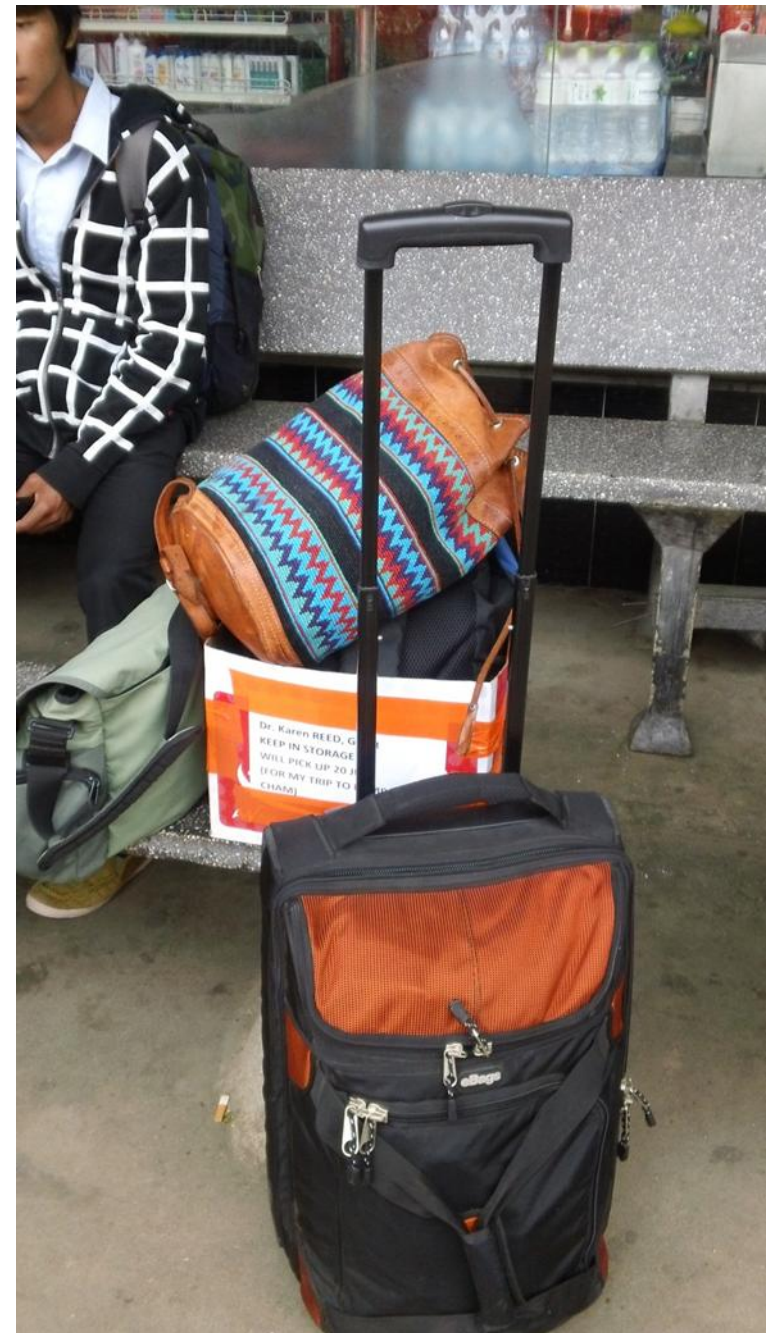
Challenges for Cambodian Nursing Education

(Sources: Direct Observation, Cambodian Interviews, & JICA)

- ❖ **No textbooks in Khmer (major language)**
- ❖ **Textbooks are not available to students**
- ❖ **English language lessons are not available to students in 4 of the 5 nursing programs.**
- ❖ **Nursing programs are not internationally recognized due to limited quality and content.**
- ❖ **WHO has a collaborative program with the University of the Philippines to create a “bridge program”. Piloted in TSMC.**

Challenge:
Cultural Hurdles
Political Hurdles
Structural Hurdles







Child Trafficking



*Lack of Resources –
Environment*



Lack of Clean Water
Lack of Safe Food





**Environmental Concerns Beyond Capacity
(arsenic in ground water)**

Future Directions

There is a need for Cambodian nurses to learn the leadership skills necessary to foster the role of professional nursing in Cambodia's health care system.



Future Directions

There is a need to expand the current nursing education options to include *BSN* and graduate programs, with access to such programs either in- country or via distance programs.



Future Directions

There is a tremendous need for masters prepared nurses to assist Cambodian nursing faculty in developing their educational delivery skill set and knowledge base.



Future Directions

There is an opportunity for nursing programs in developing nations to work together to foster nursing education/ health care in Cambodia.









Questions?

