

## Chapter 11

# Undergraduate Nursing Curriculum Content Focuses on Emerging Issues That Influence Health

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### ABSTRACT

*Undergraduate education content could hold the key to nursing workforce development. A professional's attitudes and beliefs are developed during these years, along with the ability to use knowledge and skills to promote mental health and well-being, and work with people experiencing mental health and addiction issues. Historically undergraduate education has targeted the support of illness as opposed to developing and supporting health and well-being. In the past decade research shows there is a close relationship between mental illness and addiction with physical health and early brain development. This chapter explores how the Modern Apprenticeship nursing curriculum prepares undergraduate nurses to critically think about a person or family's health at every encounter using a biopsychosocial framework by understanding that all of health is connected and the development of the brain in the early years is key to health and well-being.*

### INTRODUCTION

Workforce development to meet the needs of people experiencing mental illness or addiction issues has become critical as current structures and resources are unable to keep pace with society's mental illness needs. Adding to this idea is that future need is expected to increase (World Health Organization [WHO], 2001). This suggests the current approach to workforce development requires change in some way. WHO (2014) is of the opinion that health care systems have not been able to respond adequately to the need for treatment of mental illness and addiction issues, with 76%-85% of those who live in low to middle income countries receiving no treatment for their mental illness or addiction issues. In high income countries,

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35%-50% do not receive adequate treatment. WHO (2014) note that mental illness and addiction issues are on the increase and impact not only on mental and physical health, but also have major implications for society. Research in the last decade shows a connection between brain development and the effect of stress on mental and physical health and illness. This implies that with increased mental illness and addictions issues there will be an associated increase in physical health issues across the life course.

This chapter explores workforce development strategies that aim to build skills within a nursing workforce to support preventative approaches to mental illness and addiction disorders. This would be achieved by concentrating on developing a workforce with knowledge and skills to work with people to make life choices that enhance well-being. Nursing education is often focused on an illness model. The supporting research shows brain development in infants is critical to both mental and physical health across the life span (Shonkoff & Phillips, 2000).

When Western Institute of Technology Taranaki, New Zealand was developing a nursing curriculum, the way mental health knowledge and skills were to be taught to undergraduate nurses was considered. There appeared to be a need to move from the traditional illness focus and provide undergraduates with the knowledge and skills to make a difference in the mental health and well-being of people that nurses would encounter in clinical environments. The ideas in this chapter are based on an undergraduate nursing curriculum but could also apply to other undergraduate training programs.

## **BACKGROUND**

The nursing workforce for mental health and addictions has developed as a specialist area from an historical focus on treating illness. Undergraduate nursing education generally has mental illness and addiction knowledge and skills separated as a specialist topic. This separation supports not only a silo approach to learning but the silo use of knowledge and skills in clinical areas. In particular, neuroscience research has prompted a worldview change, with mental health increasingly being viewed from a well-being as well as an illness paradigm. This research indicates the importance of brain development as it “fits” in the development of resilience for optimum mental health and well-being.

Mental health nurses, who are part of a specialized workforce, appear to hold various views about the concepts of mental health and mental illness. This variation has led to a lack of consensus about the knowledge and skills required by nurses in undergraduate nursing curriculums (Patterson, Curtis & Reed, 2008). The result has been differences in skill level among nurses upon graduation depending on the undergraduate programmes that they have completed. Much of the literature sourced appears to be concerned with the role of nurses in treating people diagnosed with a major mental illness, as opposed to supporting mental health as a state of well-being. Nurses comprise a large proportion of multidisciplinary teams within the mental health and addictions workforce. The roles that nurses take, often allow them to spend more time with people with experience of mental illness and addiction than other health professionals (Barker, 2009). Therefore, nurses need to be prepared by their education to enter into a workplace and operate effectively in an increasingly complex, interdisciplinary health care environment, but also be able to use mental health knowledge and skill in any clinical area (Clinton & Hazelton, 2000).

Nurses play a critical role in the provision of timely, effective, and appropriate mental health and addiction promotion and care (WHO, 2007). Countries need to develop health care systems to support this. WHO (2014) argue the key to mental illness and addiction care is to provide nursing and social services that are capable of providing treatment. The nursing workforce can contribute to making this

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