Evolution of an International Collaboration: A Unique Experience Across Borders

Julie Vosit-Steller, DNP, FNP-BC, AOCN®, Allison B. Morse, MSN, ScM, WHNP, ANP, AOCNP®, and Nicoleta Mitrea, RN

An international collaboration to support and mentor palliative care nurses was developed between two educational institutions in the New England region of the United States and the Hospice Casa Sperantei in Brasov, Romania. Through teleconferences, onsite visits, research, and shared publications, the collaboration continues to be a dynamic experience for the partners and students. The seven-year relationship has affected the Romanian nursing team by providing professional education and support, as well as validation of clinical practice.

The creation of sustainable international collaborations is congruent with the mission and values of nursing and the philosophy of nursing education. Establishing collaborative nursing education and practice programs ultimately improves clinical experiences and patient care. In 2003, a transatlantic partnership was formed between a collaborative group called the New England Alliance for Hospices of Hope (NEA) and Hospice Casa Sperantei (part of the organization Hospices of Hope). NEA is an academic and collaborative relationship between the College of Nursing at the University of Rhode Island in South Kingston and the School of Nursing and Health Studies at Simmons College in Boston, MA. Hospice Casa Sperantei, located in Brasov, Romania, provides hospice and palliative care services to Brasov and its surrounding communities. Of note, the Romanian team considers hospice care part of the palliative care services.

The vehicles for collaborative education included programs via teleconferencing, onsite conferences, research, publications, and in-person visits. The seven-year relationship has dynamic vision to facilitate growth in the advancement of professional nursing in Romania; foster transformational, academic, and service partnerships; and establish a mentorship model (Bleich, Hewlett, Miller, & Bender, 2004; Gerzevitz, Ferszt, Vosit-Steller, & Mitrea, 2009). The NEA’s mission was inspired to build on the existing structure of Romanian nursing education and professionalism and to overcome cultural barriers to collaboration (Kirchhoff, 2004).

The initial connection to the Romanian nurses was made through the American Board of Trustees of the Hospice. The multinational nurses in the partnership sustain this collaboration to provide nursing education and professional development to foster evidence-based palliative care practice to nurses in Romania (Kirschling & Erickson, 2010). Eight NEA members have traveled to Romania three times; the visits also provided clinical experiences for six American nurse practitioner students. In 2009, the group also included a lymphedema therapist. Overall, these experiences influenced the participants’ interest in interprofessional collaboration and continuing palliative care education. In June 2011, 12 NEA members traveled to Romania; three members were students and five members were faculty who also were active nurse practitioners and were returning for a second or third experience. Funding for the collaboration has been privately raised by the NEA and grant supported for faculty and students by the University of Rhode Island.

Creating Collaborative Relationships

Establishing international collaborative relationships is challenging and rewarding. In the process of strengthening relationships between NEA and Hospice Casa Sperantei, members presented several teleconferences focused on improving the quality of life of terminally ill patients in Romania. The initial teleconferencing efforts in 2007 were somewhat limited in their effectiveness because of technological challenges, cultural differences influencing learning styles, language difficulty, and a perceived mistrust that was described as a throwback to the previous oppressive communist regime (Gerzevitz et al., 2009). The reported effect of a communist regime consists of lack of self-esteem, lack of trust in people, and lack of support from the state infrastructure.