Minding the Gap Regarding Human Rights Education—a Renewed Call to Integrate Human Rights Education into All Levels of Professional Nursing Programs in the US

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Abstract

Knowledge about human rights issues is important for nurses who practice. Both national and international organizations have recognized the value of human rights education for nursing students, who one day will become licensed practitioners. The history of human rights is as important as recognition of today's current human rights issues. One can locate a plethora of articles which address specific concepts related to human rights. Little can be found in the literature which addresses how human rights issues are integrated into nursing curricula. Research on the impact of human rights education on nursing students is minimal as well.

Keywords

Human rights; United nations universal declaration of human rights; World health organization; International council of nurses; American nurses association; National league for nursing; American association of colleges of nursing

Introduction

There are 497,000 student nurses in the United States (US) according to a 2017 report by The American Academy of Colleges of Nursing [1]. Given this information, the question raised in this editorial is: Have these 497,000 nursing students had human rights education and the current issues related to human rights integrated into all levels of nursing education in the United States (US) as expressed in the International Council for Nursing’s (ICN) position statement [2]?

Key international and national organizations have endorsed support for human rights education and issues related to human rights. These include the United Nations (UN), the World Health Organization (WHO), the International Council of Nursing (ICN), the American Nurses Association (ANA), the National League for Nursing (NLN), and the American Association of Colleges of Nursing (AACN).

The United Nations and its Universal Declaration of Human Rights

The principles of human rights are contained in an important document: “The Universal Declaration of Human Rights (UDHR)” which was a result of two years of dedicated work by a committee of United Nations’ delegates from many backgrounds. This committee was chaired by Eleanor Roosevelt, former 1st lady of the United States from 1938-1945 who was also known as a political activist. The UDHR came about following the atrocities of World War II in which millions of people lost their properties, livelihoods, and lives to the ravages of unchecked tyranny. Many survivors were homeless and starving and lacked any access to healthcare. This important document was proclaimed by the United Nations’ General Assembly on December 10, 1948 in Paris “as a common standard of achievements for all peoples and all nations.” It defined for the first time, fundamental human rights which were to be be universally protected. The UDHR has been translated into 500 languages [3,4].

The World Health Organization and Human Rights

The World Health Organization, (WHO) was established on April 7, 1948 and its “primary role is to direct and coordinate international health within the United Nations’ system.” A WHO convention in Russia resulted in the Alma-Ata Declaration which set the ambitious goal to have “Health for All by 2000.” Unfortunately this goal was not met. Recently however WHO has established a new initiative to establish “a human rights based approach (HBRA) to health by focusing attention and providing strategies and solutions to address health inequalities, discriminatory practices (both real and perceived) and unjust power relations, which are often at the heart of inequitable health outcomes. HBRA defines health as a “right” rather than an “entitlement” or “need”. Human rights are strongly linked to the concept of social determinants [of health]. These social determinants were developed by WHO in cooperation with the United Nations and the World Bank. “The goal of HBRA is that all health policies, strategies and programmes [sic] are designed with the objective of progressively improving the enjoyment of all people to the right to health and other health-related human rights, (safe and potable water, sanitation, food, housing, health-related information and education, and gender). Other social determinants including poverty, social exclusion, poor housing, and poor health systems are among the main causes of poor health”. WHO has set up a monitoring system for member nations to measure compliance with the standards and principles for how the goal of improving health is met [5].

In 2017 WHO also set a new goal for Universal Health Coverage for all by 2030. The goal includes equity of health services for everyone regardless of the ability to pay; the administration of quality health care which will improve health outcomes; and freedom from financial risk and harm secondary to high costs of health care [6].

The International Council of Nurses and Human Rights

“The International Council of Nurses (ICN) is a federation of more than 130 national nurses associations (NNAs), representing the more than 20 million nurses worldwide. The ICN Works to...
ensure quality nursing care for all, sound health policies globally, the advancement of nursing knowledge, and the presence worldwide of a respected nursing profession and a competent and satisfied nursing workforce." The ICN also works closely with the United Nations, the World Health Organisation [sic], the World Bank, and the International Labor [sic] Organisation [sic] Founded in 1899, ICN is the world's first and widest reaching international Organisation [sic] for health professionals. Operated by leading nurses internationally, ICN [7].

The ICN states in its own Code of Ethics that "In providing care the nurse promotes an environment in which the human rights, values, customs, and spiritual beliefs of the individual, family and community are respected (p.2). In its position statement, Nurses and Human Rights the ICN calls for human rights issues and the nursing role to be included in all levels of nursing education programs [8].

The American Nurses Association Revised Position on Human Rights

In the ANA 2016 Revised Position Statement: The Nurse’s Role in Ethics and Human Rights: Protecting and Promoting Individual Worth, Dignity, and Human Rights in Practice Settings states, “The American Nurses’ Association believes that respect for the inherent dignity, worth, unique attributes, and human rights of individuals is a fundamental principle (Code of Ethics for Nurses with Interpretive Statements) [9].” Nurses establish relationships of trust and provide nursing services according to need, setting aside any bias or prejudice. This statement on ethics and human rights provides the foundation and context for all other position statements related to the practice of nursing. The protection and promotion of human rights in health and health care are fundamental functions of the American Nurses Association.” This position statement goes on to recommend that advocating for patients’ human rights is an important key role for all nurses. The paper then addresses the role of the nurse educator as one who embraces the concepts of justice and caring as guiding principles in teaching students about ethics and human rights within the provision of healthcare everywhere—from local communities to the greater global community [10]. Furthermore the position document states that: “Nurse Educators must firmly anchor students in nursing professional responsibility to address unjust systems and structures, modeling the profession’s commitment to social justice and health through content, clinical and field experiences, and critical thought.”

National League for Nursing (NLN) and Human Rights

In a 2003 editorial titled, Social Justice, Human Rights, and Nursing Education, then editor of the NLN publication, Nursing Education Perspectives, Joyce J. Fitzpatrick expanded on an educational movement initiated by The Harvard School of Public Health and the International Human Rights Committee of the American Public Health Association and other organizations. The challenge to these organizations was to integrate human rights education into all levels of health professions’ programs including nursing [11]. In February 2017 the NLN reiterated the importance of human rights, global health, and social justice in nursing educational programs in the publication: A Vision for Expanding Nursing Education for Global Health Engagement—A Living Document from the National League for Nursing [12].

American Association of Colleges of Nursing (AACN) and Human Rights

The AACN has integrated aspects of human rights into the Essentials of Education documents for all educational levels of nursing programs with emphasis on social justice and advocacy. The specific subject of human rights is listed under “Sample Content” which can be taught according to the Essentials of Baccalaureate Education. Detailed expansion of concepts related to human rights can be found in both the Essentials of Master’s Education: 2011 and the Essentials of Doctoral Education for Advanced Nursing Practice: 2006 without specific reference to human rights [13].

Current research which could establish that human rights education has been incorporated into all levels of nursing programs in the US is limited. Publications could be found which addressed individual concepts of human rights such as equality, dignity, social justice, and advocacy from U.S. authors [14-16]. Human rights issues as they related to refugees, migrants, women, reproductive care, children, the mentally ill, and others were written about more by international authors [16-31]. Two older articles specifically addressed how human rights curricula were introduced to South African nursing programs in the post-apartheid era [31,32].

Other health professions have done better. There is evidence to suggest that physicians, medical students, social workers, and occupational therapists have incorporated human rights education into their programs of learning. The medical profession recognizes that education about human rights is critical to recognizing and documenting human rights abuses [33-35].

The arguments against incorporating human rights and related issues into education in U.S. nursing programs must be considered. Change is slow to happen and recommendations for change may not be implemented until years after the suggestion is first made. Educators themselves may not be familiar with the human rights educational movement which has been endorsed by key organizations. Educational resources may be limited. Many current professional issues textbooks which normally address ethical and legal aspects of nursing only address human rights in a very limited way or not at all.

A lack of funding for educational resources could be also argued although this author found a plethora of teaching materials on the Internet which were available without charge. Nursing educators might argue that there is not room in the curriculum for new material. The concern is always “what must be given up” in order to add new content.

Effective human rights education (HRE) has the potential to produce changes in attitudes, values, and behaviors. Through HRE, nursing students learn empowerment skills to promote social justice. Through this educational process, these same students have the potential to develop accepting attitudes toward others which facilitate tolerance and empathy in local communities and other communities around the world. With this human rights knowledge comes transformation which allows for new analytical and problem solving skills that have the potential to advocate for policy and legal changes [36-39].

In conclusion education about the history and content of the United Nation’s Declaration of Human Rights and relate human rights issues have a place in the curricula of all levels of nursing educational programs in the United States. Courses which address ethical behavior, legal aspects of the profession, social justice,
and population health would be excellent places to introduce this important topic. It is time for nurse educators to embrace the concept of human rights and educate their students about these essential human rights. Without knowledge of basic human rights there is a risk of abuse of these rights leading to even greater oppression in the world.

There are approximately 20.7 million nurses/midwives worldwide [40]. In the United States there are approximately 2.86 million nurses [41]. What a mighty force nursing there would be if 497,000 student nurses educated about human rights combined with the already 20.7 million nurses to demonstrate both leadership and advocacy for human rights around the globe! The time is now to “Mind the Gap” and to close this gap by incorporating more human rights education into U.S. nursing programs. This initiative has the potential to make the world a better place. Research as to the impact that human rights education has on nursing students would be the next logical step.

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