

Innovations in Indian Nursing :

A Study of Foreign Returned Indian Nurses as Innovators

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THE MAIN PURPOSE of this study was to identify aspects of experience which the foreign-returned Indian nurses reported as aids or deterrents for innovations. The whole process of innovation as experienced by foreign-returned Indian nurses and Indian post-basic degree holders was explored to provide suggestions that nurse-educators and administrators in India might use in introducing new concepts and procedures.

PROBLEM :

Specifically, this study attempted to find out :

How Indian nurses who have had at least one year's formal nursing education in North America compare with those who have had comparable experience in any of the countries with British form of nursing education, in their identification of new ideas and practices and recognition of factors which aid or deter the introduction of new ideas and practices into Indian nursing education.

This study also compared the perceptions and performance of Indian post-basic degree holders to the two groups.

METHOD

A questionnaire consisting of 44 concepts and procedures in nursing education and nursing practice, and five open-ended questions were used to find out the foreign-returned Indian nurses' perceptions of the innovative processes in general, and those factors which helped or hindered change in nursing in India. The respondents were divided into three groups. Group A consisted of Indian nurses who visited North American countries for formal studies. Group B included those who visited countries which

followed the British system of nursing education. The Indian post-basic degree holders made up Group C. Comparison in the perception of these groups was made through machine analysis and chi-square measures. Five cities in India were visited and twenty-seven respondents were interviewed. All inter-views were taped, transcribed and analyzed in the same way as were the questionnaires.

FINDINGS

The most important findings of the study were related to the characteristics of innovators, selection of useful and usable innovations by the respondents, facilitators and inhibitors of innovation and the general perceptions of foreign experience. These are summarized in the following paragraphs.

(1) The majority of the foreign-returned Indian nurses have introduced or were involved in introducing innovations in their own fields of specialization. This is clearly indicated in that all but a few foreign-returned nurses reported that they attempted innovations. The rate of success or failure was not very clear, for some of the failures reported were not complete failures. It was also not clear whether the successes reported were maintained.

(2) Foreign-returned nurses selected concepts and practices from both education and practice. Those who returned from the North American continent were more successful in introducing concepts related to education, educational administration and research. Those who returned from British-oriented countries tended to select and succeeded in introducing innovation-related clinical practice. The Indian group attempted concepts related to educational and clinical

practice. They did not attempt concepts related to administration.

(3) One of the most important findings of this study is that factors that could facilitate innovations could also deter them. The presence of factors such as administrative support was a facilitator, while their absence or deficiency became an inhibitor.

(4) Data in this study pointed to the need for co-operation and involvement of all concerned if innovations were to be successful. Therefore, it does not seem to be enough for innovators such as the foreign-returned or the Indian post-basic graduates to be knowledgeable and committed to change.

(5) Peer involvement and support was an important variable for the success or failure of innovation; where co-workers and immediate superiors encouraged and supported, innovations succeeded, but where the support was lacking, innovations failed.

(6) Administrative support and provision of proper finances were important influencing factors in the introduction of innovations.

(7) The majority of foreign-returned Indian nurses was greatly satisfied with their foreign experience. They realized the objectives with which they had visited foreign countries. Most felt that their experience was wonderful and worthwhile. Many gained insights of fresh knowledge, self-confidence and social success. A few respondents in this study reported that the courses in such fields as public health nursing were not beneficial because the public health nursing pattern in the countries where they took these courses was completely different from that of their home countries. A few wished that they had had more time to observe or take part in clinical practice in the country they visited.

(8) Ideas from both North American countries and British-oriented countries resulted in useful innovation in nursing education as well as nursing practice. This study reported that nurses going to different countries gained knowledge in different aspects of nursing. Those who went to the United Kingdom

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graph TD
    PC[Personal Characteristics] --> IV[Innovator-Variables]
    IV --> P[Personality  
Knowledge before going abroad  
Experience  
Cosmopolitanness]
    F[Facilitators] --> A[Administrative  
Finance  
Facilities  
Personnel]
    F --> S[Support  
Non-nursing personnel]
    P -.-> K1[Knowledge I]
    P -.-> S1[Success adoption]
    FS[Foreign Study] --> C[Cultural  
Functional  
Clinical  
Research  
Comparative]
    FS --> E[Evaluation (dissatisfaction)  
Insights  
Ego success  
Commitment]
    C --> K1
    E --> P2[Persuasion II]
    K1 --> P2
    P2 --> D3[Decision III]
    D3 --> C4[Confirmation IV]
    D3 --> S1
    D3 --> F1[Failure rejection]
    F1 --> I[Inhibitors]
    ESV[Educational System Variable] --> K1
    ESV --> P2
    ESV --> D3
    ESV --> C4
    CCS[Characteristics of Concepts innovative] --> P2
    CCS --> D3
    CCS --> C4
    CCS --> F1
    CCS --> I
  
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The flowchart illustrates the process of innovation adoption, showing the progression from Personal Characteristics and Facilitators through various stages (Knowledge, Persuasion, Decision, Confirmation) to Success (adoption) or Failure (rejection).

Personal Characteristics (Innovator-Variables) include: Personality, Knowledge before going abroad, Experience, and Cosmopolitanness. These factors influence the initial stages of the process.

Facilitators include: Administrative (Finance, Facilities, Personnel) and Support (Non-nursing personnel). These factors also influence the initial stages of the process.

The process progresses through four main stages:

- Knowledge I**: Influenced by Personal Characteristics and Foreign Study (Cultural, Functional, Clinical, Research, Comparative).
- Persuasion II**: Influenced by Knowledge I and Foreign Study (Evaluation (dissatisfaction), Insights, Ego success, Commitment).
- Decision III**: Influenced by Persuasion II and Educational System Variables.
- Confirmation IV**: Influenced by Decision III and Educational System Variables.

The process can result in either **Success (adoption)** or **Failure (rejection)**. Factors influencing the outcome include:

- Success (adoption)**: Influenced by Personal Characteristics, Facilitators, and Foreign Study.
- Failure (rejection)**: Influenced by Decision III, Educational System Variables, and Characteristics of Concepts (innovative).
- Inhibitors**: Factors that can lead to failure or rejection.

Educational System Variable includes: North American systems, British approaches, and Indian approaches.

Characteristics of Concepts (innovative) include: Relatively better (new) for patient care—Education, Compatibility, Complexity, Triability, and Observability.

RECOMMENDATIONS

Concluding Remarks

As can be seen from this model, the process of innovation in relation to foreign-returned Indian nurses starts with the personality characteristics possessed by them before they went abroad and those which they developed during their sojourn. These include their involvement with professional activities, experience, and cosmopolitanism.

They were exposed, not only in theory but in actual practice, to new concepts and practices. This knowledge in the milieu of the domestic scene which was full of dis-satisfactions provided them with insights, strengthened their egos and their commitments. These persuasions and their knowledge about concepts helped them to make a decision to try new concepts and practices. A set of facilitators helped them to succeed while a set of inhibitors caused struggle and at times failure or rejection of new ideas.

Whether the concepts and procedures which were successfully adopted were permanently continued or given up after some time, and whether those that were rejected were again attempted, was not within the scope of this study. The model conforms with the stages of

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