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Has the pandemic response entrenched a pathogenic emphasis in education?

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The COVID-19 pandemic has reinforced the emphasis on preparing nursing graduates for secondary care. This trend is evident in many countries, where the pandemic has reinforced a focus on acute care, with less emphasis on primary and social care (Williams et al, 2020; National Council of State Boards of Nursing, 2021).

In the UK, the fields of nursing in mental health and children and young people, together with community-based placements for all learners, have been significantly impacted by pandemic-related health service closures and placement capacity, carrying the risk that a generation of well-equipped acute care nurses will dominate and perpetuate the focus on pathogenesis - a retrospective approach that determines how individuals can avoid or manage disease. We suggest this approach may not impart the knowledge and skills

needed for students to be proficient in a system that must move beyond disease-focused pathology. Nurse education should reclaim the humanity of caring.

Although the seismic impact of the pandemic should provide a point where sustained change happens, there is a risk that professional bodies, universities, nurses, and individual educators will continue to pay lip service to the salutogenic approaches that are critical for the health and wellbeing of populations (Antonovsky, 1979; 1996; Howarth and Leigh, 2020). The concept of salutogenesis, which emphasises the origins of health rather than disease, was derived by Antonovsky in 1996 and studies the '*strengths and the weaknesses of promotive, preventive, curative and rehabilitative ideas and practices*'

The Nursing and Midwifery Council (NMC) Standards of Proficiency for Registered Nurses state that at the point of registration, nurses should be able to understand the contribution of social influences, health literacy, individual circumstances, behaviours, and lifestyle choices to mental, physical, and behavioural health outcomes (NMC, 2018). This includes applying partnership, collaboration, and interagency working across all relevant sectors and providing students with valuable learning experiences in these areas. Although these Standards align with principles of salutogenesis, the pandemic has reinforced the focus on proficiencies as simply technical skills, jeopardising the promotion of a more holistic and personcentred approach to the care of people by nurses.

The focus on nursing students achieving technical proficiencies is generating a shift towards the more pathogenic aspects of nursing care. Learners' preoccupation with performing skills prevents them taking the opportunity to translate the theory of salutogenesis into practice. Shifting the mindset: salutogenic focus in nurse education in a post-pandemic world Antonovsky (1996: 171) cautioned that promoting a salutogenic orientation is challenging as 'pathogenesis is too deeply entrenched in our thinking ...'.

We argue that to achieve a salutogenic focus, nurse education must rapidly change to prepare and provide experience within community and private voluntary organisations; moreover, this experience must be perceived by students as crucial to the nursing role. In the UK, the push toward social prescribing is one example that illustrates the need for urgent change.

Comparable with the theory of salutogenesis, social prescribing as an intervention goes beyond illness to explore the creation of wellbeing and foster potentials that enable individuals and populations to flourish (Bailey-McHale et al, 2020). It requires the collaboration of community and primary care agencies that focus on the person, not the illness (South et al, 2008). Baker and Irving (2016) referred to this as a form of co-production that involves linking people with non-clinical activities to enhance their sense of wellbeing. Question and critique nurse education practice As with many commentaries, we raise more questions than answers. Preparedness to question and critique nurse education practice is key to progression and transformation (South et al, 2008).

We encourage wide discussion and debate on the following questions that will help shift the mindset from the pathogenic to the salutogenic focus in nurse education in a post-pandemic world:

1. Is the acquisition of technical skills and clinical proficiencies taking precedence over compassionate, inclusive care?
2. Has the focus on technical skills resulted in losing sight of the person?
3. Is there a clear emphasis in the curriculum that values the salutogenic nursing role? How do we best change the mindset of nursing students and educators around the value of salutogenesis, showcasing the rich learning that takes place within the community and private voluntary organisation sector?

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We encourage wide discussion and debate on the position of professional bodies, universities, nurses, and individual nurse educators. The drive to staff wards and care for critically ill people within an overstretched health system has created an emphasis on skills, rather than the humanity of the profession. Salutogenesis, and social prescribing, are presented as a point of departure to ensure not only evidenceinformed practice, but also compassionate care. There is an urgent need to move from a 'tick-box' mentality of proficiency and focus on technical skills to a salutogenic approach. Shifting the emphasis could help to change the mindset of our student nurses, and educators, through showcasing the rich learning that takes place within the community and private voluntary organisation sector and how this makes a positive impact upon the person in receipt of care, enabling nurses to reclaim the humanity of caring.

References

Antonovsky A. Health, stress and coping. London, JosseyBass; 1979

Antonovsky A. The salutogenic model as a theory to guide health promotion. Health Promotion International. 1996;11(1):11-18. <https://doi.org/10.1093/heapro/11.1.11>

Baker K, Irving A. Co-producing approaches to the management of dementia through social prescribing. Social Policy & Administration. 2016;50(3):379-397. <https://doi.org/10.1111/spol.12127>

Bailey-McHale R, Whaley V, Bailey-McHale J. Social determinants of health. In: Filho WL, Wall T, Azul AM, Brandli L, Özuyar PG (eds). Good health and well-being (Encyclopedia of the UN Sustainable Development Goals series). Chamomix: Springer; 2020: 647–657

Howarth M, Leigh J. Social prescribing: collaboration in times of stability and crisis. Br J Nurs. 2020;29(10):578- 579. <https://doi.org/10.12968/bjon.2020.29.10.578>

National Council of State Boards of Nursing. Policy brief: U.S. nursing leadership supports practice/academic partnerships to assist the nursing workforce during the COVID-19 crisis. 2021. <https://tinyurl.com/mj6r6fet> (accessed 26 October 2022)

Nursing and Midwifery Council. Realising professionalism: standards for education and training. Part 3: standards for pre-registration nursing programmes. 2018. <http://tinyurl.com/yaale26c> (accessed 26 October 2022)

South J, Higgins T, Woodall J, White S. Can social prescribing provide the missing link? Primary Health Care Research & Development. 2008;9(4):310-318. <https://doi.org/10.1017/S146342360800087X>

Williams GA, Maier CB, Scarpetti G et al. What strategies are countries using to expand health workforce surge capacity during the COVID-19 pandemic?. Eurohealth.2020;26(2):51-57. <https://tinyurl.com/47b82wv>