The impact of The Florence Network in advancing nursing and midwifery in Europe

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ABSTRACT

Diversity of the nursing workforce and multiculturalism of European cities have mandated the need for culturally sensitive nurses and midwives able to provide effective, engaging, high quality and socially just healthcare. The Florence Network is a professional network that aims to bring together like-minded professionals and to cultivate relationships amongst nurses and midwives from different European Union (EU) countries to create synergies on matters of common interest by transcending national and cultural barriers.

A qualitative study based upon a focus group interview was conducted with six former Presidents and one present President of the Florence Network, each with a tenure of two years. The study explored the impact of the Florence Network in advancing cultural awareness and promoting educational, research and professional synergies.

The outcome of the study identified that from the Presidents perspectives networks create awareness of cultural diversity, enable the delivery of multicultural nursing care and develop future leaders regarding global health-related issues. Furthermore, professional networks contribute to the refining of educational curricula, in developing applicable research evidence, and in sharing formal and informal professional knowledge.

1. Background

Free movement policies of services and labour within the European Union (EU) and a series of economic and socio-political factors such as the financial crisis, unsatisfactory working conditions and limited career prospectives in lower-income EU countries have accentuated the mobility of the nursing workforce within the EU (Collins and Hewer, 2014; Palese et al., 2016). Also, the increased ageing of the nurse workforce, the reduction of nurse education and training places, the development and expansion of new nurse-led services, and a sectorial shortage of nurses in higher-income countries led to active policies and strategic targeting of foreign nurses from low-income countries as a short-term answer to nurse shortages (Glasper, 2016; Scammell, 2019).

Furthermore, there is a continuous increase in global migration for populations in general. Environmental disasters, population displacement due to war, persecution and social instability, and intentional migration due to economic and educational opportunities have contributed to a steady increase in population mobility and consequent cultural diversification of communities (Lori and Boyle, 2015; Tuohy, 2019). The past three decades witnessed societal multicultural shifts in most EU countries and a proliferation of ethnically diverse cities, creating cultural and linguistic non-homogeneous communities (Shen, 2014; Mikkonen et al., 2016).

The literature asserts that cultural awareness and cultural competence of nurses as fundamental for quality clinical care and professionalism, and with a significant positive impact on health care provision

(Benbenishty et al., 2017; Holland, 2018). A diverse nursing workforce is currently not only an inevitability but an essential component for the adequate provision of culturally competent care, for promoting equality and tolerance in the workplace, and for reducing social disparities (Heaslip et al., 2017; Aurilio et al., 2019).

Despite the societal multiculturalism, the literature asserts that there is an identified limited cultural understanding of ethnic minorities and language and cultural misunderstandings further contribute to health care disparities (Drewniak et al., 2017; Heaslip et al., 2019). Similarly, high attrition rates and an unengaged nursing workforce is witnessed primarily in nurses with racially diverse backgrounds or with English as not the first language (Barbé et al., 2018; Fowler, 2018). Moreover, the literature asserts that culturally and linguistically diverse nurse education is challenging not least due to the lack of standardisation of nursing education primarily within the EU area that enables free movement of nurses (Mikkonen et al., 2016; Ranchal et al., 2015).

One way the literature considers meeting the challenges emanating from cultural diversity and the lack of educational standardisation is connecting like-minded professionals via professional networks (Chichester, 2014). Professional networks, on the one hand, develop convergences and synergies on matters of common interest transcending national and cultural barriers, and on the other hand promote the sharing of tools, materials and information of best practices (Fritsch and Zang, 2009; Mendes et al., 2013).

Furthermore, professional networks are considered indicators of professional maturation responding to genuine demands of service users resulting from policy inaction or policy developments with the overall intention of the advancement of practice, education, research and publication (Moon et al., 2006; Fritsch and Zang, 2009). This population mobility, societal multiculturalism and the diversification of the nurse workforce prompted the creation of The Florence Network in 1995. Currently, the Florence Network has 45 Higher Educational Institution (HEI) members from 19 different European countries. The initial focus of The Florence Network was the facilitation of student and lecturer mobility amongst EU countries, but consequently developed its' scope to work collaboratively in developing joint strategies for educational activities based on best practices and synergies on matters of common professional interests surpassing national and cultural barriers (Florence Network, 2017).

2. Aim

The purpose of this study is to explore the impact of The Florence Network in advancing cultural awareness, refining curricula, enabling research development and promoting professional visibility of nursing and midwifery.

3. Methods

3.1. Design

The current qualitative study used a focus group interview to collect data from individuals that served or currently serve as presidents of The Florence Network. The focus group design of the study aimed at facilitating the exchange of views amongst presidents creating the space for them to listen to each other's expressed experiences and to elicit discussions with potential points of agreement or disagreement concerning the Florence Network. Thus, providing greater clarity and understanding of the workings of The Florence Network. The use of focus group to collectively interview the seven presidents was deemed appropriate as it created synergies amongst members eliciting otherwise unattainable information and provided immediate validation or refutation of information by other group members inspiring and stimulating in this way the discussion (Lane et al., 2001).

3.2. Research setting

The study was carried out during the 25th annual meeting of The Florence Network and in a private meeting room at the university campus. At least a month before the 25th annual meeting, all former presidents and the current president received an open invitation to participate.

3.3. Sampling

The current study used a purposeful sampling method. From the total of eleven presidents, seven participated in the focus group interview. Three former presidents were not able to attend due to pre-planned commitments, and one former president has passed away. Typically focus groups have a small number of participants who meet for a limited time and discuss a given topic; in this case, seven participants discussing the impact of The Florence Network. Such numbers are considered appropriate for achieving effective communication and sufficient for collecting relevant data (Mackey et al., 2014).

3.4. Data collection

The current study used a semi-structured interview format. The focus group interview lasted for 2 h and was audio recorded. A researcher led the focus group discussion to generate descriptive and explanatory information. A moderator further facilitated the data collection by encouraging discussion within the group and ensuring participation of all, whereas the researcher asked the questions, recorded answers and took notes (Gillett et al., 2016). Both the moderator and the researcher were part of The Florence Network, making their presence unobtrusive to the discussion process. Both, had experience in collecting qualitative data, did not have any authoritative position over the participants and remained mindful throughout the data collection process of their potential influence to the flow of the group discussion (Drury et al., 2014).

3.5. Data analysis

The data analysis commenced with reading and re-reading several times line-by-line the transcribed data as to familiarise with the collected data and identify key phrases and concepts (Clarke and Braun, 2013). The semantic and conceptual data of the transcriptions constituted the first cycle of the NVivo coding process. Consequently, each excerpt from the raw data was scrutinised for meaning and labelled with a code from the researchers, thus completing the second cycles of the NVivo coding (Saldana, 2016). Consequently, the codes were reviewed to identify similarities and common characteristics amongst them clustering similar codes into explanatory patterns creating a total of three themes (see Table 1).

3.6. Ethical issues

All the participants received written information about the aim of the focus group discussion in advance, and all informants signed a letter of consent. Participation was voluntary with the potential to withdraw from the study at any point without any consequences. All data

Table 1
Themes and Codes

Number of Themes	Themes Name	Number of Codes
Theme 1	Cultural Sensitivity and Leadership on Global Health Issues	19
Theme 2	Curriculum Standardisation and Research Collaborations	14
Theme 3	The Role of Professional Networks	16

remained confidential, and anonymity was secured. The study had approval from the university's ethical committee.

4. Results

4.1. Theme 1: cultural sensitivity and leadership on global health issues

The Florence Network significantly increased nursing and midwifery student and faculty exchange in member institutions. These exchanges developed student and faculty competencies, tolerance and flexibility in adapting their knowledge and skills to new cultural settings. Thus, creating awareness of cultural diversity and professional practice variations. Similarly, the literature acknowledges that international collaborations and dialogue across borders stimulates inquisitiveness, promotes the exchange of ideas, broadens and betters participants' understandings of professional issues, develops self-confidence in overcoming daily barriers and develops participants culturally sensitive (Myhre, 2011; Bearnholdt et al., 2013). However, the literature also identifies that lack of adequate preparation and a good understanding of the country of exchange can hamper the benefits of the exchanges, leading students and faculty to withdraw from interactions and ultimately impairing the development of intercultural competencies (Salman, 2019).

> *During the last five years, the Network has exchanged approximately 500 students and 200 lecturers. Before the establishment of The Florence Network nursing had no internationalisation … the development of intercultural competences among undergraduate students is not the only perceived benefit of international mobilities, the development of students' self-confidence and ability to adapt to new settings is equally a valuable result.*

Furthermore, additional personal and professional options and opportunities can become available for exchange students in the country of their exchange. The dominating feeling of all participants was that student exchange programs promoted by The Florence Network have a positive effect in advancing students' future professional career prospects with greater professional opportunities becoming available across countries. Similarly, other studies identified that international exchange programs have a positive effect upon students both personally and professionally and can create international leadership and career opportunities regarding global health issues (Ortega, 2016; Stone et al., 2016).

> *Some students ended up moving to another country or finding a partner in their host country. Concerning the development of transcultural understanding, I agree that the exchange makes some changes that are important in their career…. concerning professional development, I think it's vital that we cooperate and we learn from each other.*

Similarly, faculty members interaction and collaboration with peers from different countries within The Florence Network is both a learning opportunity to develop leadership skills and a vivid realisation that educationalists face very similar problems across countries and have similar aspirations for developing the profession. Studies focusing on faculty interaction originating from different countries and immersing in a different culture suggest that the exchange creates cultural awareness and sensitivity, opens the mind and forges a much more inclusive professional culture (Ong-Flaherty, 2015; Leung et al., 2017).

> *The highlights from my presidency are the feelings of learning a lot about leadership … with so many people from so many different backgrounds gave me another perspective of leadership … another positive thing was the fact that you learn by meeting a lot of people abroad who like you have not only the same ideas as you, but they want to work on them and have the same goal in nursing.*

4.2. Theme 2: curriculum standardisation and research collaborations

The participants considered that nursing and midwifery curricula lack standardisation amongst EU countries and significant variations exist in terms of both content and process. The stage of academisation varies between countries, and the focus of the curriculum in some countries has a strong biomedical focus, whereas, in other countries, the curriculum stresses more strongly nursing and midwifery leaning. The literature identifies a similar asymmetry in academic development and nursing centred education across EU countries despite convergence efforts initiated by the Bologna process (Dobrowolska et al., 2015). Nurses do not always control the professional focus as in some countries, governmental agencies control entry and curriculum content, weakening the influence of nursing and midwifery professional bodies. In other cases, an identified ambivalence exists as to whether the profession should be dominated by medical logic or by humanistic nursing logic (Beedholm and Frederiksen, 2014; Ranchal et al., 2015). Notably, the participants of the current study considered that The Florence Network provides an opportunity for countries that have a more robust nursing and midwifery centred curriculum to support other countries to strengthen these elements in their curriculum and for nurse educators to be inspired by each other.

> *Academisation is at different stages across many European countries, and the transition has variability. The curricula of some universities have a strong biomedical base. One of the most critical issues now is to educate and support these institutions, to improve supervision and nursing centred care of Bachelors' student nurses.*

One of the key motives for becoming a member of The Florence Network is recognising and consequently exploiting the research experiences and knowledge of the English language of other members. The intellectual environment provided by the Network enables, on the one hand, the fertilisation and exchange of research ideas and on the other hand, the inspirational context for developing research collaborations. Similarly, the literature acknowledges that international collaborations and dialogue across borders stimulates the exploration and exchange of nursing and midwifery ideas, and broadens views and understandings (Ganske et al., 2007; Immonen et al., 2008). However, there is a nagging concern in the literature that much nursing research is non-programmatic, uncoordinated, and therefore unnecessarily repetitive and eventually of little use (Richards et al., 2014). The current study suggests that professional networks provide the necessary coordination and academic English language skills as to counter weaknesses specific to countries or geographical areas and to make research more widely visible and a more strategic endeavour.

> *The prime reason for joining the Network was a strategy to utilise the strengths of partner's English language skills for publication; research was a massive point for us because English is not our strength, to publish you need to have partners that have that strength.*

Moreover, the assumption is that research collaboration opportunities provided by The Florence Network create results that will trickle down and inform practice, the profession and the curriculum as a whole and serve as a means to develop involved students into future researchers and nurse scientists. This assumption concurs with relevant literature suggesting that formal nursing networks have a significant impact on developing new curricula through research (Richards et al., 2014; Hanssen and Olsen, 2018). Nonetheless, the literature is equally cautious about the status of research in nursing throughout Europe as research remains an undervalued and under-resourced activity, and in those cases that research activities exist the resultant findings are highly descriptive with limited applicability (Richards et al., 2014; Gibson, 2019).

We discussed different projects and research studies, ranging from topics such as education structure and didactic systems to leadership in internationalisation. Integration of research in the exchange processes and the involvement of students in research may be a way forward.

4.3. Theme 3: the role of professional networks

From its inception, one of the main objectives of The Florence Network is increasing visibility of the nursing and midwifery professions. Despite the ambition for greater visibility and policy involvement, this aspect of the Network remains challenging to achieve. In part, the difficulty lies in the political and lobbying skills required that may not be readily available to members. However, the number of member institutions and the pan-European nature of the Network provides the foundation for a significant impact on policy developments. The literature suggests that the European Higher Education Area ought to be exploited via networks to highlight daily caring practices, to share knowledge, and to become a repository of updated, unspoken and contextualised evidence and practices, thus enhancing the visibility of the caring professions (Hoeve et al., 2013; Manzano-García and Ayala-Calvo, 2014).

From its establishment, the Network aim was to make nursing and midwifery more visible. At that time, we were invisible comparing to other professions, and in 1997 the Visibility Group was formed. The purpose of the Visibility Group was to further the Network's visibility in an international context. Making nursing and midwifery more visible was perhaps the most challenging network aim to achieve … I think we should be more political as a network we should try to use our strength together as 45 members … to be more interventionists.

Crucial to achieving the aims of The Florence Network is its non-hierarchical structure, the years of accumulated experience and the inclusive atmosphere that creates a sense of shared vision for the future. The literature argues that international nursing networks are crucial for cross-border cooperation and presuppose inclusiveness, transparency, a degree of voluntary involvement and minimisation of hierarchical structures (Van Muilekom et al., 2014; Bae et al., 2015).

One president learns from former presidents and is useful in achieving the network goals and keeping the group together. The inclusive atmosphere and continuity are deemed important for the development of institutional cooperation. There is not only a continuity of members but also the continuity of Network aims.

Membership to The Florence Network does not require a fee, and this makes it attractive to a variety of institutions, especially to institutions that do not have the financial means to participate, hence giving voice to institutions with limited economic resources. The fees-free membership to the Network allows for greater diversity and representation within the Network, levelling inequalities between institutions and countries across Europe. Usually, fee requirements impede participation to professional groups as the financial resources are not always readily available. In contrast, fees-free membership enables parity between institutions of richer and poorer countries, thus creating a clear message that healthcare and educational issues are shared and require all-embracing solutions (Coates and Fraser, 2014; Taylor, 2017).

The Network has no fees and no external funding resources. The lack of financial resources is a weakness and strength of the Network. The support for network activities is purely voluntary, but this allows more involvement from poorer countries.

4.4. Limitations

This study is limited in scope as it is a qualitative study focusing on one professional network, namely; The Florence Network. The findings cannot, therefore, be assumed to be representative of all professional networks. But as any qualitative study, the aim is not representativeness in a mirror-like sense but transferability of ideas and assumptions extrapolated from the data. Moreover, the article does not aim to provide a final say on professional networks, but rather to open the public debate and inspire the profession to seek cross-country collaborations and networking.

5. Conclusions and recommendations

The Florence Network as a professional network provides the opportunity for student and staff to participate in international exchange programs creating awareness of cultural diversity, enabling better preparation to deliver multicultural nursing care and developing leadership skills regarding global health issues. Secondly, professional networks have a significant impact on curriculum refinement and research development by inspiring and informing member institutions of various possibilities, and through partnerships counterbalancing individual weaknesses and eventually developing more applicable, non-duplicate and relevant research evidence. Thirdly, while professional networks as The Florence Network are repositories of shared formal and informal professional knowledge and experiences, nonetheless this has not contributed to the targeted levels of professional visibility and policy involvement in healthcare.

The current study recommends that cross country professional networks are an important element for developing cultural sensitive nurses and midwives, delivering multicultural care, developing leadership regarding global health issues and contributing to applicable research evidence. However, still more significant efforts are required in influencing professional visibility and in having a considerable impact on policy-related matters. Future challenges for professional networks are a more in-depth understanding of whether professional visibility and policy impacting merely takes longer to become apparent or if professional network structures must improve to serve the aims of professional visibility and policy impact.

Contributor

Assistant Prof. Dr. Sabina Ličen collected the data by conducting the focus group interview *(to be tranferred to the manuscript file)*.

CRediT authorship contribution statement

Stefanos Mantzoukas: Methodology, Formal analysis, Resources, Data curation, Writing - original draft, Writing - review & editing. **Susan Schärli-Lim:** Conceptualization, Formal analysis, Investigation, Data curation, Writing - original draft. **Hélène Kelly:** Conceptualization, Formal analysis, Investigation, Resources, Data curation, Writing - original draft. **Katarina Falk:** Formal analysis, Resources, Data curation, Writing - original draft. **Sibylle Frey:** Methodology, Formal analysis, Investigation, Resources, Data curation, Writing - original draft. **Chris Van Der Aa:** Conceptualization.

Declaration of competing interest

None.

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