

## **Mitigating Risks in Education Abroad with Theory Grounded Strategies**

**Janet H. Davis**

Purdue University Northwest. USA

**Kyle Rausch**

University of Illinois Chicago

**Gemma Delicado Puerto**

University of Extremadura, Spain

**Jesús M. Lavado García**

University of Extremadura, Spain

---

### **ABSTRACT**

Based on the Theory of Bureaucratic Caring, recommendations are offered in order to cover different areas crucial to the development of an education abroad experience. The recommendations include the areas of pre-departure and in-country orientations, legal and health considerations, a crisis response plan, psychological and physical well-being, adapting to the host culture, readapting

at home, housing/homestays, safe excursions and mitigating risk in clinical service-learning abroad. The time devoted to collaboration in planning “Explore Healthcare in Spain” resulted in meeting the stakeholders’ needs with a program reflecting bureaucratic caring for students throughout the process. The coronavirus pandemic threatens to stall nursing’s progress in education abroad as it brings new risk management challenges. The recommended strategies hold promise for mitigating risks and reflect a sound footing in a theoretical base.

**Keywords: Nursing, Risks, Education, Theory, Spain**

---

The coronavirus pandemic has drastically impacted many aspects of higher education. This has been especially salient for institutions’ internationalization efforts, which often include education abroad programming. Education abroad participation of U.S. college and university students has grown over the past several decades. For example, during the 1998-1999 academic year, 129,770 students studied abroad for academic credit and during the 2018-2019 academic year, that number had grown to 347,099 students, representing a marked increase in participation. However, for the 2018-2019 academic year, only 7 % of U.S. students who studied abroad were in the health professions (Institute of International Education, 2020).

Nursing programs across the country are working to increase international opportunities for their students (Mailloux, 2017). These include Arizona State University Edson College of Nursing faculty-directed programs for students: “East African Endeavors in Community Engagement and Health Development” and “From Lima to Machu Picchu: Exploring Healthcare, Culture and Ethics in Peru.” The University of Illinois at Chicago College of Nursing in recent years has offered a faculty-directed

program that travels to the island nation of St. Kitts and Nevis to understand disaster preparedness and global health perspectives. The first author led an inaugural study abroad service-learning course for Purdue University Northwest nursing undergraduates to Nicaragua. As positive as the faculty momentum is in this area, those who are involved in such programming must take into consideration the considerable complexity of the interaction between institutional investment in and faculty managed oversight of education abroad programs.

The current pause in education abroad caused by the pandemic's international travel bans can be used by nursing faculty to partner with their stakeholders to strategically develop program offerings in light of the pandemic's impact. Such programs will enrich the cultural scope of U.S. nursing in the future. The purpose of this paper is to converge existing knowledge, expertise, and research that currently exist in both the divergent fields of education abroad and in nursing education under theory-grounded recommendations with a program example.

### **Explore Healthcare in Spain**

Purdue University Northwest with campuses in Hammond Indiana and Westville Indiana enrolls approximately 9,000 undergraduate and graduate students. The College of Nursing supports curricula that foster critical inquiry through experiential learning and community partnerships. As Napolitano and Duhamel (2017) wrote, "Nursing students are largely excluded from travel-abroad studies because of demanding curricula, lack of time, and cost" (p. 53). In an effort to grow participation by nursing students in education abroad, the Purdue University Northwest Office of Global Engagement and the College of Nursing jointly developed and sent a college-wide survey to all currently enrolled undergraduate and graduate students in the winter of 2020 to inform future program design. Sixty-five percent of the students indicated

they were likely to consider short term education abroad, related to time, financial, and family life reasons, and 90% wanted to study in Europe.

Based in part on the results of this survey, the authors collaborated on a new non-credit offering, “Explore Healthcare in Spain.” Purdue University Northwest had partnered with University of Extremadura for 23 years in offering semester abroad study in the Spanish language. The long-standing partnership between the universities is built on trust and mutual respect which supported the development of this first nursing offering. The program host University of Extremadura is a Spanish public university located in the region of the Southwestern area of Spain and at the border with Portugal. It is the only university in a region of one million inhabitants. It was founded in 1973 by the Ministry of Education and Science of Spain. Currently the University has around 25,000 students.

“Explore Healthcare in Spain” connects University of Extremadura faculty and students with nursing faculty and students from Purdue University Northwest and includes visits to community health organizations, affording students a first-hand glimpse into Spain’s healthcare system. The planned spring break week-long program provides insight into the impact of the pandemic on international healthcare by comparing the cultural, political, educational, technological, and economic forces influencing healthcare systems. The objectives are: 1) Examine cultural influences on healthcare and 2) Reflect on cultural competence while interacting with the healthcare team and members of the community. The program includes discussion seminars facilitated by the international faculty, clinical site visits, and group cultural excursions.

### **Grounding Framework – Bureaucratic Caring**

A more nuanced understanding of education abroad bureaucracy is needed given nursing programs’ interest in

developing education abroad opportunities for students and a heightened awareness of global threats and how they may impact travelers. The Theory of Bureaucratic Caring provides parameters for the dynamic structure of education abroad programming. Marilyn M. Ray used a qualitative design to study caring within hospitals as the focus of her doctoral dissertation work. In her findings, she applied Hegelian dialectical analysis of the thesis (caring) and antithesis (bureaucracy). This synthesis evolved in the Theory of Bureaucratic Caring which positions caring within an organizational context (Ray & Turkel, 2015). Ray proposes that nursing care is a relational process framed by a healthcare organization's bureaucratic dimensions. According to the theory, bureaucratic values compete with humanistic caring values, impacting the work of nurses in organizations (Ray & Turkel, 2012). In this way the theory illustrates conflict between the "business" and the "caring" sides of healthcare organizations. According to the theory, bureaucratic caring unifies the thesis of caring (spiritual-ethical) and the antithesis of bureaucracy (legal, technological, political, economic, education, social-cultural, physical factors).

The theory has been applied to nursing in both education and service organization settings. Maykut and McKendrick-Calder (2013) used the Theory of Bureaucratic Caring in developing a baccalaureate nursing course that examined the interrelated provincial, national, and international trends and issues affecting the Canadian healthcare system. In other Canadian work, the theory provided a theoretical framework to guide nursing in addressing maternal health inequities experienced by indigenous peoples (Waschuk, 2018). Johnson (2015) applied the theory to the multiple systems that impact the advanced practice Registered Nurse's (APRN) role in home healthcare. In a process improvement project, the theory

guided the improvement of patient care set within a complex healthcare system (Potter & Wilson, 2017).

Recognizing the interplay of university bureaucratic and nursing humanistic caring priorities produces holistic guidance for international programs' development and delivery. It is particularly important during times of stressful change to uncover the contextual meanings of mutually experienced events and processes. The Theory of Bureaucratic Caring is useful as the foundation for education abroad partnerships because it considers the relationships of all stakeholders within complex bureaucratic systems. In education abroad programs there is a unique student-faculty caring relationship that emerges from jointly experiencing international travel. Faculty are concerned about ensuring their students' health and well-being and in turn, students rely on the faculty for support and guidance while in a foreign country (Davis & Spoljoric, 2019). These characteristics guided choosing the Theory of Bureaucratic Caring for the theory grounded strategies in "Explore Healthcare in Spain."

The coronavirus pandemic drove home the global interrelatedness of the Theory of Bureaucratic Caring dimensions: 1) legal, 2) technological, 3) political, 4) economics, 5) education, 6) social-cultural, 7) physical, 8) spiritual-ethical in education abroad. For the purposes of this article, the authors use the term faculty director to denote the lead faculty member from a nursing program who has proposed, teaches in, and leads an education abroad program.

## **Theory of Bureaucratic Caring Dimensions**

### *Legal*

The legal factors impacting caring include responsibility, accountability, policies and procedures, informed consent, and liability exposure (Ray, 2015). The Forum on Education Abroad (2020) has produced the

*Standards of Good Practice for Education Abroad.* Standard 5.1.7 states: “Each organization shall have policies and procedures in place regarding security and risk management that prioritize the health, well-being, and safety of students and personnel, including, but not limited to: Risk assessment and monitoring for program locations and activities; Tracking, responding to, and reporting critical incidents; Written emergency plans and protocols; Insurance coverage” (p. 28). The Forum’s standards serve as a roadmap for institutions offering education abroad opportunities to ensure that they are considering the risks involved with sending students to particular places in the world and mitigating those risks through careful program design and creating and sharing resources for the program participants. The *Scope of Practice for Academic Nurse Educators* Standard of Practice Competency VI: Pursue Continuous Quality Improvement in the Nurse Educator Role states that the nurse educator “Uses knowledge of legal and ethical issues relevant to higher education and nursing education as a basis for influencing, designing, and implementing policies and procedures related to students, faculty, and the education environment” (Christensen & Simmons, 2019, p. 20). Examples of policy and procedures legal documents include a fair program admission process, participant contracts/waivers to reduce institutional liability, consent forms giving permission to the university faculty to seek out healthcare for participants, and accessible as well as participant acknowledged health and safety and other vital program information.

The scope of training for program leaders also applies to the legal domain. For example, the “Explore Healthcare in Spain” faculty director’s Title IX training documentation demonstrates that she received reporting and response training. Applying these legal considerations to education abroad means that the faculty director is

required to inform the student about specific possible and actual safety, health, and security risks.

Universities have an obligation to mitigate any foreseeable risk that faculty and students may face. Many institutions of higher education in the U.S. have policies governing student and faculty/staff travel, require a formalized proposal and review process, and provide required training for program participants. Faculty directors leading programs should be aware of institutional policies related to emergency response protocols and resources and contingency plans. An appreciation of how these legal aspects contribute to good care of both students and faculty in education abroad can help in facilitating the details of these requirements.

### *Technological*

Bureaucratic technological resources, are equipment and machines, including computers, electronic communication, and the knowledge and skills to effectively use the resources (Roy, 2015). Organizations sending students abroad should require that all participants have a comprehensive international health insurance policy that includes coverage for emergency evacuation and repatriation. Faculty directors should receive a copy of the insurance policy along with information about how individuals contact the provider, open a claim, and any notable exclusions, with particular attention given to the types of activities nursing programs are likely to involve. Clauses covering reimbursement of program fees and travel expenses are important. If working with local partners, the faculty director needs to know what liability insurance, if any, they carry.

Emergencies can happen during programs, and faculty directors are responsible for appropriately reporting and responding to an emergency. Given the wide variety of emergencies that may impact a program, it is advisable that incident-specific scenarios and protocols are developed and



reviewed with faculty directors. For instance, what should a faculty director do if a student goes missing? Is arrested? Is hospitalized? Is the victim of sexual assault? Discussing how to respond to these and other scenarios and having the procedures documented will help faculty directors feel more empowered to respond in times of an emergency, and will help limit the institution's and the faculty director's liability. The National League for Nursing (n.d.) offers broad advice in its *Faculty Preparation for Global Experiences Toolkit*© such as registering travel plans with the U.S State Department prior to departure and knowing the location of U.S embassies while in country.

The coronavirus pandemic has highlighted the importance of having contingency plans in place for programs abroad. Now more than ever before, care should be taken to determine how a group could be safely evacuated should conditions in the host country require a premature end to a program. Since an abrupt ending to a program could impact students' academic progress. Faculty directors should develop alternative methods for delivering course content and collecting student work should travel be cut short or not permitted altogether. Bureaucratic technology can be a resource for developing academic continuity plans. For instance, faculty can consider creating an online course framework built in the institution's learning management system. It can help prepare students for the experience while also serving as a backup forum in which to continue the class should travel become interrupted. Similarly, guest speakers can be brought in using platforms like Zoom if conditions prevent travel.

Depending on the in-country travel and communication technology, students may be allowed to travel on their own if independent excursions are covered under the travel insurance plan. Students should be required to follow these steps: 1) Check the U.S. embassy and its warnings on unsafe territories; 2) Avoid travel to

any location where the U.S. government has restricted or forbidden visits; 3) File an electronic and paper copy of a “travel form” with the faculty director that includes information about transportation (bus, train, flight, etc.), dates, where the student is going and with whom; 4) Provide name, address, and phone number of lodging such as hotels, hostels or any address where the student will be staying along with a contact’s name, phone, and email; 5) Always carry a hard copy card with the program leader’s and host director’s information and emergency numbers; 6) Always carry a charged cell phone and a charger and program emergency numbers into the cell phone; 7) Carry a copy and have a COVID passport or proof of vaccination/negative test result downloaded into a cell phone. Independent excursions are not allowed in the example program due to the full itinerary for the week-long experience.

It is difficult to generalize about the risks of public transportation because there are several factors that increase or decrease the risk. General recommendations for using public transportation are: try to travel at off-peak times, reduce the number of changes, buy tickets online, keep a distance away from other passengers, and wash hands at arrival. The example program uses a private vetted van service with seat belts for group transportation to and from the airport and for excursions. The technological resources needed for international programs may incur additional costs to the institution. Providing them as part of a safe education abroad experience is a non-negotiable bureaucratic responsibility.

### *Political*

In the immediate academic community, institutional politics and an organization’s power structure influence stakeholders’ competition for tangible resources and intangible rewards. It is recommended that faculty directors have an initial meeting with political stakeholders

such as the university contact for study abroad programming, the travel safety manager, the centralized study abroad office, or a departmental contact before program development begins. Discussion outlining the roles and expectations of these stakeholders includes authority and accountability for decision-making. Host partners should inform U.S. partners about specific country and/or regional program considerations prior to the arrival of the group. This information can be shared during virtual sessions and during in-country orientation. The host collaborates on a local response plan for emergency contacts, evacuation procedures, methods to communicate with parents, and embassy information. A final version of the plan is written up a few weeks prior to the arrival of the U.S. group so it is connected to the latest national considerations.

In the broader international community, on-site partners should provide students with scientific literature that describes the strengths and weaknesses of the host healthcare system and clarifies evident differences with their own country. The language to be used during education abroad should also be clarified during orientation. English is the language used in “Explore Healthcare in Spain.” Besides major differences among healthcare systems, differences in health policies and national health strategies, there are important differences in the daily practice of nursing in different regions of the planet. *A priori*, these differences may provoke some rejection among nursing students, but being in contact with other ways of doing may be very useful in order to import best practices and enrich the U.S. healthcare system. This is one example of how political factors can nurture caring in education abroad.

### *Economics*

Realistically, in education abroad, goods, money, and services, supported by tuition, fees, and grants, are

required to provide caring (Ray & Turkel, 2014). “Explore Healthcare in Spain” met the student survey responses’ program price point of approximately \$2,000. The program needed to at least break even based on student enrollment according to university policy. Salary or stipends for the faculty director were negotiated early in the program planning process with clear guidelines for reimbursable expenses and reimbursement processes. The faculty director’s travel expenses and housing in Spain were covered and a small stipend was offered.

Program housing is a facet of program coordination where conflicts can arise. Sometimes, in the interest of saving money, faculty directors may propose sharing accommodations with students or teaching assistants. Even if the student or teaching assistant is fine with this arrangement, it is not advisable due to the potential for allegations to arise and protecting the faculty member’s liability.

With regards to student housing, the example program includes a host family stay, which can often be another way to make program costs more affordable for students. Host family stays have the benefit of sometimes being cheaper than more expensive student apartments and can be a good value if they offer the inclusion of meals. The host partner provided reasonable homestays with meals, in-country transportation, and excursion costs for the program budget. Accessing university resources such as special scholarships and awards to overcome financial barriers for education abroad is an example of bureaucratic caring.

### *Education*

The Theory of Bureaucratic Caring education dimension includes informal and formal education (Ray & Turkel, 2014). The complex caring obligation for education abroad programs differentiates the faculty director responsibilities from the typical faculty role on the home

campus. It can be helpful to equate the scope of the faculty director's roles to those of various bureaucratic positions on a traditional college campus such as dean of students, an advisor, a health professional, and a residential life coordinator. Accordingly, it is imperative that faculty directors receive professional development education to help them assume these role responsibilities. Where appropriate, bringing in institutional experts on topics can be an excellent way to ensure that faculty directors are receiving information that is grounded in the institution's protocols. Additionally, including experienced faculty director colleagues can be a powerful addition to professional development sessions.

The student's education abroad experience should be accompanied with training and orientation negotiated between the U.S. faculty director and the on-site host partner. Kalbarczyk et al. (2019), present the range of pre-departure preparation training available to public health, clinical, and undergraduate trainees across the continuum of education for short-term experiences in low-and middle-income countries. According to these authors, ensuring well-being of faculty and students during the experience is considered a priority of the faculty trip director. In the example program, the formalized orientation can be hosted virtually. Additionally, the lead faculty for the on-site student seminars, were recruited from the host nursing faculty. These faculty also participate in the scheduled student informal events.

#### *Social-cultural*

Examples of social and cultural factors particularly applicable to education abroad are communication; social interaction and support; community involvement (Ray & Turkel, 2014). A pre-departure orientation introducing students to the new country, culture, language, and cultural differences illustrates the social-cultural aspect of bureaucratic caring. This prior guidance will enrich

students' ability to correctly interpret the behaviors and events observed during their stay and the information gathered from the perspective of the host culture. In addition, important health and safety information that is situated in the host culture context can be shared during these pre-departure meetings. Involving the institution's education abroad or travel safety office in such meetings helps ensure that proper institutional protocols regarding international health and safety are communicated.

“Explore Healthcare in Spain” is an island program meaning that the participants are all from the home institution and travel and take part in class and social-cultural excursions together as opposed to taking classes with local students. The island approach carries some risk management considerations. Students may sign up for island programs not knowing one another or the faculty and because there are no formal class meetings necessarily taking place before the program starts abroad, it is critical that faculty directors take the time to coordinate pre-departure meeting(s) to allow students to begin forming bonds that will serve them well in-country. Cultivating a group where members trust and look out for one another is an essential task for faculty directors and can go a long way in helping prevent or respond to health and safety concerns once abroad

Homestays are excellent intercultural opportunities for students, however, proper vetting and preparation of families and students must be done. Most host families collaborating with University of Extremadura have been part of education abroad for a good number of years, three of them for more than 20 years. There is a relationship of complete trust with these host families.

### *Physical*

The physical state of being factors include mental health needs (Ray & Turkel, 2014). The coronavirus pandemic has increased the scope of bureaucratic caring

flowing from the theory's physical dimension. In the example program, health protocols applied to stays with host families follow national guidelines from the U.S. and Spain. One current practice is that prior to the trip students and faculty directors are informed via a virtual session of any extra COVID prevention strategies being used in Spain. Some of these strategies include: proof of vaccination, proof of pre-arrival testing, consistent hand washing, masks, social distancing, efficient ventilation in every room of the host family's home, and individual bedrooms for students. Students will be required to bring the U.S. equivalent of the European vaccination passport.

During study abroad, most students experience some degree of culture shock as they learn to adapt to their host culture or country. According to the classic *Survival Kit for Overseas Living* (Kohls, 1984), they could experience: anxiety (physical and/or psychological issues); homesickness (may lead them to spending excessive time on Skype or social media); helplessness (need for excessive amounts of sleep); boredom (only seeing students in the group); depression (avoiding contact with host nationals); self-doubt (loss of ability to study effectively); psychosomatic reactions (quitting and returning home or staying and hating host). There are a number of routines that directors can provide to students for mitigating culture shock. For example, first understand the symptoms and recognize the signs of culture shock which are normal. Understand that this is a passing phase and use the support network of education abroad classmates and others working in the program.

Reflection and validation over the international experience should be systematic and built into the program. One systematic approach deconstructs events and encounters so that deeper and multiple understandings might be considered (The Center for International Programs, 2012). Journaling and de-briefing discussions

are common reflection practices. De-briefing daily in different formats and activities is a crucial part of a safe education abroad experience in order to validate interpretations of new experiences. These practices are included in the example course.

At the same time that adapting to the host culture may be hard, readapting to the U.S. culture may take some time. Students can start contacting their friends back home and make plans to meet after returning. Once home, the student can also stay in contact with international friends for treasured relationships.

### *Spiritual-ethical*

Spirituality involves creativity and choice; ethics are moral obligations to others (Ray & Trukel, 2014). In education abroad this is realized by making bureaucratic choices for the good of others. Education abroad programs afford faculty members and students a unique opportunity to engage outside the confines of a traditional classroom, but doing so brings a host of potential personal concerns for faculty directors. A best practice is for faculty to clearly delineate “program time” from “off-program time,” perhaps including this in the syllabus for the program. In this way, faculty directors and institutions are likely to be better protected in case a student is involved in an incident during “off-program time.”

There are many different aspects of a program that can introduce ethical considerations. For instance, if there is an official group meal during the program and alcohol is served, this could raise questions about the faculty director’s liability. As another example, if a faculty director offers to lead a small group of students on an extra activity that is not officially part of the program itinerary and an incident occurs, the faculty director’s judgment may be questioned.

Many global health programs have a foundation based in service, an attractive component of an education



abroad program especially for those in the health professions. However, as Weinberg (2010) states, “All individuals engaged in service learning—students, mentors, and program administrators—have an ethical duty to ensure that global health programs are responsive to local needs, conducted in a way that upholds professional standards, and carried out with safeguards to prevent harm to both patients and participants” (p. 147). Nursing programs abroad, then, should take into account these additional ethical responsibilities they have to the host culture.

In the case of nursing programs, care includes the risk of physical harm to patients and the risk of students becoming sick, hurt or infected with a contagious disease. In this sense, it is key to prepare students to overcome fear by preparation in order to be involved in any kind of clinical service-learning while studying abroad. Students and U.S. faculty directors have to be informed and trained, with substantiating documentation, about what to do in case of biological risks. These include country required vaccinations, PPE availability, needlestick injury, and body fluid exposure. Aligned with bureaucratic caring, “Explore Healthcare in Spain” aims through respect and caring communication, to facilitate education abroad for the good of others.

## **Conclusion**

The Theory of Bureaucratic Caring recognizes that that multiple system inputs are interconnected to form an organization’s caring culture. Making education abroad work in a university system requires knowledge and understanding of bureaucracy, which is by its nature is rigid. The complexity of change driven by the coronavirus pandemic has impacted university legal, technological, political, economic, education, social-cultural, and physical factors related to education abroad. In a rapidly changing world, universities need to adapt to changes, be flexible,

and assume that challenges and risks are part of education abroad. As illustrated in the program example, the structure of university bureaucracy can work in conjunction with a partner relationship to create caring. For this reason, working with a solid host partner with whom deep ties exist is fundamental for the success at mitigating risk in a post pandemic global context. The commitment to caring for education abroad students shared by our organizations was the bridge for our interactions. Collaboration supported by organizational resources is clearly essential to support the faculty director's roles and responsibilities. Effective risk management is a key consideration for all nursing faculty directors to incorporate in a changed global healthcare environment. One best practice is that U.S. higher education institutions and nursing departments collaborate with already known and trusted partners for nursing programs that include academic and service experiences for students. A limitation of this paper is that converging the bureaucratic fields of education abroad and nursing education through Theory of Bureaucratic Caring was applied to only one program example. It is recommended that spiritual-ethical caring for the good of others should be examined in future education abroad program development.

## **References**

- The Center for International Programs. (2012). *Integrative cultural research project student handbook*. Kalamazoo College. <https://cache.kzoo.edu/bitstream/handle/10920/25913/ICRPHandbook2011-2012.pdf>
- Christensen, L.S., & Simmons, L.E. (2019). *The scope of practice for academic nurse educators and academic clinical nurse educators*. (3rd ed). National League for Nursing.

- Davis, J. H., & Spoljoric, D. (2019). Comfort: Context for the study abroad faculty role. *Nursing Science Quarterly*, 32(4), 314–319.  
<https://doi.org/10.1177/0894318419864327>
- Forum on Education Abroad. (2020). *Standards of good practice*. <https://forumea.org/resources/standards-6th-edition/>
- Institute of International Education. (2020). *Open Doors*.  
<https://opendoorsdata.org/>
- Johnson, P.V. (2015). Ray's Theory of Bureaucratic Caring: A conceptual framework for APRN primary care providers and the homebound population. *International Journal for Human Caring*, 19(2), 41-44. <http://doi.10.20467/1091-5710-19.2.41>
- Kalbarczyk, A., Nagourney, E., Martin, N. A., Chen, V., & Hansoti, B. (2019). Are you ready? A systematic review of pre-departure resources for global health electives. *BMC Medical Education*, 19(1), 166.  
<https://doi.org/10.1186/s12909-019-1586-y>
- Kohls, R.L. (1984). *Survival kit for overseas living for Americans planning to live and work abroad*. (4th ed.). Intercultural Press.
- Mailloux, C.G. (2017). Benefits of study abroad in nursing. *Journal of Nursing and Patient Care*, 2(1). doi: 10.4172/2573-4571.1000e103
- Maykut, C., & McKendrick-Calder. L. (2013) Designing a fourth year baccalaureate nursing course utilizing the lens of the Theory of Bureaucratic Caring and a root cause analysis Approach. *International Journal for Human Caring*, 17(3), 29-33.
- Napolitano, N., & Duhamel, K. V. (2017). Reflections on an innovative approach to studying abroad in nursing. *Creative Nursing*, 23(1), 53–57.  
<https://doi.org/10.1891/1078-4535.23.1.53>
- National League for Nursing (n.d.) *Faculty preparation for global experiences toolkit*©.

[http://www.nln.org/docs/default-source/default-document-library/toolkit\\_facprepglobexp5a3fb25c78366c709642ff00005f0421.pdf](http://www.nln.org/docs/default-source/default-document-library/toolkit_facprepglobexp5a3fb25c78366c709642ff00005f0421.pdf)

- Potter, M. A., & Wilson, C. (2017). Applying bureaucratic caring theory and the Chronic Care Model to improve staff and patient self-efficacy. *Nursing Administration Quarterly*, 41(4), 310–320. <https://doi.org/10.1097/NAQ.0000000000000256>
- Ray, M. (2018). Theory of bureaucratic caring. In M.J. Smith & P. Liehr (Eds.), *Middle range theory for nursing* (4th ed., pp. 107-117). Springer.
- Ray, M. A., & Turkel, M. C. (2012). A transtheoretical evolution of caring science within complex systems. *International Journal for Human Caring*, 16(2), 28–39.
- Ray, M. A., & Turkel, M. C. (2014). Caring as emancipatory nursing praxis: the theory of relational caring complexity. *Advances in Nursing Science*, 37(2), 132–146. <https://doi.org/10.1097/ANS.0000000000000024>
- Ray, M.A, & Turkel, M.C. (2015) The theory of bureaucratic caring. In M. Smith & M. Parker (Eds.), *Nursing theory and nursing practice* (4th ed., pp. 461-482). F.A. Davis.
- Waschuk, K. (2018). Inequities within indigenous maternal health: A prevailing issue. *International Journal for Human Caring*, 22(2), 14-19. <https://DOI:10.20467/1091-5710.22.2.14>
- Weinberg, J. (2010). Global health ethics at home and abroad. *Virtual Mentor*, 12(3), 146-148. doi: 10.1001/virtualmentor.2010.12.3.fred1-1003

### **Authors Bios**

**Dr. Janet H. Davis** is an Associate Professor in the College of Nursing at Purdue University Northwest. She has held faculty and administrative positions at several universities in the Midwest. Her scholarship, teaching, and service focus on nursing leadership development to impact healthcare disparities. She is a Principal Investigator, Co-Principal Investigator, or Co-investigator for six funded studies on diversifying the nursing workforce. Her approximately 50 publications include research, teaching, and public service articles. Dr. Davis was appointed to and currently serve on the Illinois Nurses Association Diversity, Equity, and Inclusion Advisory Council. She is also a peer consultant/evaluator for the Higher Learning Commission.

[Davis962@pnw.edu](mailto:Davis962@pnw.edu)

**Dr. Kyle Rausch** is an experienced education abroad professional whose work has focused on the oversight of faculty-directed education abroad programs, including the development of program leader training and institutional risk management policies and protocols. Currently serving as the Executive Director of the Study Abroad Office at the University of Illinois at Chicago, Kyle's experience includes helping institutions build capacity for education abroad, specifically for institutions that serve high numbers of underrepresented students. Kyle earned a Doctor of Education from Arizona State University with his research focusing on supporting first-generation college students in education abroad.

**Gemma Delicado** holds a PhD in Humanities from the University of Chicago. She also obtained a MA at Western Michigan University and attended Kalamazoo College. Currently she is an Associate Professor for the English Department at the University of Extremadura, Spain. She

was awarded the Teaching Excellence in the Humanities in 2017. She was appointed Director for International Affairs and Mobility in February 2019. She was Associate Dean for International Affairs (2012-2016). She is currently the Resident Director of the Purdue Northwest study abroad program and The Integrative Cultural Project Coordinator for the Kalamazoo College (USA) study abroad program in Spain.

**Jesús M. Lavado García** holds a PhD in Nursing from the University of Extremadura. He is an associate professor at the Nursing Department. He was appointed Dean of the Nursing and Occupational Therapy School in 2014. He is the Vice president of the National Conference of Deans of Nursing. His main topics of research are palliative care and also osteoporosis in women. He has collaborated with Purdue University in several projects since 2016.