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Comparative study of the undergraduate community-based nursing curriculum in Shahid Beheshti university of medical sciences, school of nursing and linfield school of nursing

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Abstract:

BACKGROUND: Revising UCBNC using successful education systems in the world to guarantee the quality of the curriculum is necessary. This study aimed to compare the undergraduate community-based nursing curriculum at Shahid Beheshti University of Medical Sciences, School of Nursing, and Linfield School of Nursing.

MATERIALS AND METHODS: The present comparative descriptive study was conducted using Beredy's four-step approach (description, interpretation, juxtaposition, and comparison) in 2022 and searched the required data using keywords. The fundamental elements of the community-based nursing curriculum were collected and analyzed from the website and internal and external databases.

RESULTS: The findings of this study showed that there are main differences in the curriculum of the two schools. All dimensions of the Linfield School of Nursing curriculum are designed based on the community-based nursing education model focusing on communication, community, cultural diversity, health, social justice, stakeholder engagement, evidence-based practice, and responding to community needs. Still, the attention and emphasis on the mentioned items in Iran's curriculum are fragile.

CONCLUSIONS: The nursing curriculum in Iran should be revised based on the community-based nursing education model, and according to the local conditions, background, and community needs so that can be achieved to the maximum productivity and efficiency of nurses using meet the community needs.

Keywords:

Community-based, comparative study, curriculum, nursing, undergraduate

Background

Tursing undergraduate course is the first degree of education in this field, and this level is the basis for the training of professional nurses that can provide services and care to the person, family, and community in different fields.[1] The

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role and domain of nursing practice have changed in response to the dynamic needs of individuals, communities, and healthcare services; for example, population growth, aging, the increase of the number of people with chronic, emerging and epidemic disease, and technological changes, have aroused the

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need to changes in service delivery. [2,3] Nurses must be able to forecast and manage the care of people in a changing community; for example, the results of a study showed that the competence of students in disaster situations is very weak [4] and nursing interventions and disaster management in the community are other important issues. [5] However, nowadays, many nursing curricula have failed to prepare students to work in the community. For developing a nursing curriculum, it is better to consider an appropriate model that can meet the needs of students to facilitate the way for the nursing curriculum in the future and be in accordance with the professional characteristics and to make the necessary skills in students to meet the health needs of the community. [6]

Community-based education (CBE) is a model for increasing the relevance of education to population needs and includes learning activities in which the community is used as the main learning setting, [7] in which not only students but also nursing educators, community members, and representatives of other departments actively involve to the educational experience, [6] and by receiving the necessary training, students will be able to provide service in complex situations of the community.[8] The British and American education system has been a special focus on CBE because they came to this conclusion that this program has had positive results and it increases the personal skills and professional competency of nurses, and for this reason, they suggest using this approach. [9,10] The results of the systematic review study in 2021 showed that CBE at the undergraduate level improves the professional skills, communication, critical thinking, team working, knowledge, and self-confidence of nursing students.^[11]

The results of the Barasteh et al.'s (2021) study in the field of the future challenges of the nursing system showed that in Iran, nursing services are mainly provided in hospitals and the education of nurses is not in accordance with the community needs, so their activity doesn't meet the needs of the community, expanding education in home care, and intermediate care centers such as palliative care centers and nursing homes that provide transitional services as a link between home care and hospital care; in the last curriculum, it looks weak, and therefore, it is necessary to correct nursing education in Iran; also, according to the community needs of, the need to develop the role of community-based nurses has increased;^[12] however, instead of role playing at the community level, nurses continue to pay their old roles in the hospital, in hospital-based education, nurses have low preparation in various aspects of health and affecting factors, and therefore, the conventional method of teaching students in hospitals is not a suitable method anymore for the development of students because of students do not earn the ability to work in community, and they can't

respond the needs of community. ^[6] Changing the setting of nursing education from hospital to community is a suitable solution for in-depth learning of graduates in facing the problems of the community and empowering nurses and improving the quality of education. ^[13]

Many studies have been conducted with the aim of comparing Iran's undergraduate nursing curriculum to the countries in the world, [14] developed and developing countries, [15] Jordan, [16] Australia, [17] South Korea, [18] California,[19] America,[20-22] China,[23,24] Japan,[25] Singapore, [26,27] Malaysia, [28] Turkey, [29] England and Canada, [30,31] Scotland, Lebanon, UAE, and India[32], and all studies have shown that the existing curriculum in Iran has weaknesses and needs to be revised. The student to training in the hospital does not earn the necessary capabilities and skills to provide effective and quality services in order to provide and promote the health of the community. Therefore, the revision of the nursing curriculum should prepare students in such a way that they have the ability to face the problems of the community.[7]

None of the studies to the comparison of the nursing undergraduate's curriculum has not been paid to CBE as an effective and efficient educational approach and model in response to the needs of stakeholders and the changing community that can be very helpful in designing the educational program. The mission of a comparative study is to address the differences and similarities of various educational systems and uses their results to develop the educational system, and improve the content and quality of educational programs.^[16] Also, using the experiences of successful countries will be helpful to improve Iran's nursing education system.^[19]

The Ministry of Health and Medical Education (MOHME) has executive responsibility for health and medical education within the Iranian government. Iran's health system is highly centralized, and almost all decisions regarding general goals, policies, and allocation of resources are made at the central level by MOHME.^[33] Therefore, considering that Linfield School of Nursing is one of the best nursing schools in community-based nursing education, and^[34,35] this study was conducted with the aim of comparing the undergraduate community-based nursing curriculum of Shahid Beheshti University of Medical Sciences (SBMU), which follows the educational program of Iran's centralized educational system, with the Linfield School of Nursing.

Materials and Methods

Study design and setting

The present study is descriptive and comparative that has been done with the aim of comparing the undergraduate community-based nursing curriculum of SBMU School of Nursing and Linfield School of Nursing in 2022.

Study participants and sampling

The inclusion criteria were related to the subject of study, community-based nursing education, and the undergraduate nursing curriculum. The exclusion criteria were the studies focused on hospital-based education.

Data collection tool and technique

In this study, Beredy's four-step approach was used, in which two or more phenomena are compared from different aspects and includes four stages of description, interpretation, juxtaposition, and comparison. In the description stage, the research phenomena and the studied situation were prepared for the next stage based on the collection of evidence and information and by providing data from various sou the edu cou mic edu nur by of r the und of N stu SBN Lin sou inte firs cou obje stru stu exp wer juxt pre frar and see finc the acco diff bas thes wei

of the community-based nursing curriculum of the SBMU School of Nursing and Midwifery.

Results

The results obtained from the comparison of the community-based nursing curriculum of SBMU nursing school in Iran and Linfield School of Nursing, in relation to the philosophy, mission, and vision of the program [Table 1], general goals of the course [Table 2], educational models [Table 3][37-39] the structure of the course [Table 4], the job position [Table 5], and the results expected of the graduates [Table 6] are presented in the form of Tables 1-6 and [Figure 1].

Discussion

The present study was conducted with the aim of comparing the UCBNC of SBMU School of Nursing in Iran and Linfield School of Nursing in America. The similarities

urces for review and criticism. According to this, e information required for the community-based ucational program of Iran's undergraduate nursing urse through the website of the faculty of nursing and idwifery of SBMU (2022) and the community-based ucational program of the continuous undergraduate ursing course of the MOHME of Iran, approved the 54th session of the supreme planning council		Islamic culture, spirituality, compliance with ethical principles, professional knowledge, providing holistic and community-oriented nursing care based on the nursing process
medical sciences in (2014) ^[36] and the elements of e community-based educational program of the dergraduate nursing course of the Linfield School Nursing, USA, using the keywords of comparative ady, curriculum, nursing, CBE, undergraduate,	Mission	Education of committed graduates who rely on up-to-date knowledge, skills, compassion, professional ethics, and establishing effective professional communication that provides nursing care services needed by members of the community from prevention to rehabilitation.
MU, Linfield University through the website of infield University (2022) and the desired reliable urces were searched and receive. [37-39] In the terpretation stage, the descriptive data of the st stage includes the definition and history of the urse, philosophy, mission and vision, general jectives, educational models, characteristics and ructure of the course, conditions and methods of udent acceptance, evaluation, job position, and	Vision Linfield	Over the next ten years, undergraduate nursing curriculum in line with the changing needs of communities will be able to dynamically that obtain the regional and global standards of nursing education. Undergraduate of nursing graduates will gain a defined and effective position in providing care at all levels of health from prevention to rehabilitation in the country's health system, and they will provide effective services in the way of improving the health level of the community. ^[36]
pected outcomes from graduates in both universities ere examined, interpreted, and analyzed. In the staposition stage, the information prepared of the evious two stages was put together to create a amework for comparing similarities and differences d the necessary classification was done that can be en separately and two by two in the tables of the	Philosophy	Providing intercultural health care within and between different communities, respect to the multiple points of view, diversity of the learning environment, social justice and health inequalities, supporting of the vulnerable populations, nurses' leadership role in building healthy communities, partnerships to the clients, healthcare providers, and the other stakeholders.
dings section. Finally, in the last stage, comparison, the research problem was examined and compared cording to the details in the field of similarities and efferences and the research questions were answered sed on the available articles. [40] Finally, based on	Mission	The mission of Linfield School of Nursing is to create an inclusive and responsive community to the needs of the global community, in a changing healthcare environment, using research and evidence-based practice, guiding student learning within a cultural context, and training lifelong learners.
ese similarities and differences, practical suggestions ere presented in each part to improve each element	Vision	The education of professional nurses is to take care of the health of the complex global community.[37-39]

Table 2: Comparing UCBNC overall goals of SBMU School of Nursing and Linfield School of Nursing

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SBMU	Goals	Training of efficient human resources is needed
		by the community in nursing in order to improve
		the health of the community and to strengthen
		education and research services to improve the
		level and scientific quality of the graduates.[36]
Linfield	Goals	Nurturing lifelong and responsive learners to
		meet the health needs of the community in
		various settings.[37-39]

Table 3: Comparing UCBNC education models of SBMU School of Nursing and Linfield School of Nursing

SBMU Model The education model is not specifically mentioned in the nursing curriculum of Iran, but the studies show that the design of the existing curriculum is based on the medical model and taken from the nursing

courses of other countries.[21,24] Linfield Model Linfield School of Nursing uses a theoretical model of community-based nursing education that provides a visual organizational structure for the curriculum. The model reflects the dynamic relationship between global and local communities and the community of learning. Central to this community of learning is a focus on learner-centered education, which engages students in the practice of health promotion, illness prevention, and treatment and reflects the value of social justice. The curriculum is grounded in a liberal arts education that includes integrative learning, inclusive excellence, and experiential learning. The curricular themes of communication, community, diversity, ethics, health, and stewardship provide a foundation for the program's design and are developed throughout the program. Professional education includes nursing knowledge, clinical skills, and socialization into nursing practice. How the student engages in a process of inquiry includes evidence-based practice, praxis, and reflective practice.[37-39]

and differences of the community-based nursing curriculum in the two faculties were compared. Since Linfield's undergraduate nursing curriculum is designed based on the community-based nursing education model, by using the dimensions of this educational program, practical, and efficient solutions to improve the quality of Iran's education program in the field of community-based nursing were presented [Figure 1].

Linfield's undergraduate nursing curriculum has been developed by the school itself, according to the characteristics of the school and community but SBMU's undergraduate nursing curriculum has been notified to all medical sciences universities in Iran through a regulation of the MOHME. Comparing of philosophy showed, SBMU School of Nursing has an Islamic, community-oriented, and holistic philosophy that has emphasized ethical, spiritual principles, and the nursing process. [36] While the Linfield School of Nursing in its philosophy has emphasized a lot of broad social

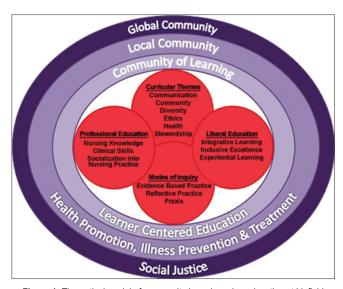


Figure 1: Theoretical model of community-based nursing education at Linfield School of Nursing

concepts such as cultural diversity, social justice and health inequalities, and participation with communities and stakeholders.[38] The results of the studies showed in line with the findings of the present study; although in Iran, community-oriented care has been emphasized but ethnic differences and cultural diversity, social justice and fair distribution of health resources, cooperation, and participation have not been considered in philosophy and they have suggested that philosophy should be revised according to the mentioned cases.^[14,20,21,31] The meaning of social justice is the fair and just benefit of the people of a community of health care based on need which is at the heart of community-based health promotion actions to achieve health equity and its education is important. [41] There is cultural diversity both within the country and among them, and nurses are morally committed to providing care according to the culture; in order to the nurse to provide effective care to a client with a different culture or ethnic background, the nurse tries to understand the other person's point of view regarding their cultural framework; when they are not successful in this field, the consequence will be inequality in care, considering that there is ethnic diversity in Iran understanding the beliefs of clients, patients, and families and paying attention to their needs deepens the relationship between the nurse and the client; [42] therefore, education of students in this field is very important. Community participation means creating opportunities to enable all members of a community to participate actively and effectively in the process of development and exploitation that health promotion programs seek the participation of the community and stakeholders as active partners; therefore, it is very important to pay attention to the issue of participation in CBE.[43,44] It seems that according to the comparison made, the development of the undergraduate nursing curriculum

Table 4: Comparing UCBNC characteristics and structure of SBMU School of Nursing and Linfield School of Nursing

SBMU

Characteristics The undergraduate nursing education program is continuous and general in the form of theory, practical, and clinical.

The duration of the course is 4 years and includes 132 units (24 units of general courses, 15 units of basic courses, 54 units of specialized courses, 18 units of internship during the first 3 years, and 21 units of internship in the field in the

4th year).

Structure general courses:

Theoretical foundations of Islam, Islamic ethics, Islamic revolution, Islamic history and civilization, history of culture and civilization of Islam and Iran, familiarity with Islamic sources, Persian literature, general English, physical education, and family and population knowledge.

. .

Anatomy, physiology, genetics and immunology, biochemistry, microbiology, parasitology, statistics, research, and information technology in nursing

specialized courses:

Nutrition and nutritional therapy, principles of epidemiology and fighting common diseases in Iran, individual and social psychology, pharmacology, specialized language, patient education process, nursing principles and, skills, nursing ethics and professional communication, individual and family health nursing, community health nursing, environment health nursing, health status assessment, maternal and child health nursing, nursing in maternal and child health disorders, basic concepts of nursing, adult and elderly nursing 1, 2, and 3, nursing care at home, comprehensive nursing care in special units, emergency nursing in crises and unexpected events, healthy and sick child nursing, mental health nursing and mental illnesses and principles of nursing service management

internship and internship in the field:

Principles and skills of nursing, maternal, and child health nursing, community, individual, family and environment health nursing, adult and elderly nursing 1, 2, and 3, healthy and sick child nursing, special care nursing, clinical pharmacology, home care nursing, nursing service management, and emergency nursing.^[36]

Linfield

Characteristics Linfield School of Nursing has two undergraduate nursing programs. One is a two-year program with 54 units for

ordinary people and the other is a one-year program with 24 units for RN to bachelor of nursing. Both programs lead

to a bachelor's degree in nursing.

Structure The 54-unit program for undergraduate nursing students includes four courses on the foundations for

community-based nursing practice, chronic health, acute health, stewardship for health, and the following course units: Foundations of community-based nursing practice, professional communication in health care, evidence-based nursing, integrated experiential learning 1 to 4, nursing care of clients, children, adults, elderly, and families across the lifespan living with chronic and acute conditions, clinical pathophysiology and pharmacology for nursing practice,

nursing mental health and disease across the lifespan, transitions in health and disease, population-based nursing in a multicultural and global community, nursing management and leadership.

The 24-unit program for RN students includes the following units:

Professionalization, professional communication in health care, evidence-based nursing, population-based nursing,

nursing leadership, and integrated experiential learning.[37-39]

in Iran is not appropriate to the characteristics of the target community. For this reason, attention to social concepts in the current educational program is weak.

The comparison of the mission showed that in both faculties, nurses' compassion and commitment has emphasized. The mission of SBMU's undergraduate nursing curriculum is the education of capable graduates that provide the nursing services needed for the community from prevention to rehabilitation. [36] While the mission of Linfield School of Nursing is the education of graduates based on culture and evidence-based learning^[38] that has been neglected in the mission of Iran's curriculum. Inconsistent with the present study, the results of Adib Hajbaghery et al.'s study showed that attention to the characteristics and cultural diversity of the clients in the mission, goals, and overall structure of Iran's curriculum seems weak.[19] The results of Pourteimour et al.'s study showed that evidence-based learning should be considered in the mission of Iran's

curriculum. [14] According to the comparison, not taking into account culture and cultural diversity due to the diverse ethnic background in Iran is one of the most critical gaps in the current program, which seems to be caused by its lack of community-oriented. Therefore, it's recommended that the mentioned items be given more attention and emphasis.

One of the important points in an organization is the goals, and activities of the organization are in line with the vision, which provides a framework for comparing current and future performance. Linfield School of Nursing's only vision is to train professional nurses to take care of the health of the complex global community. Is It seems that the vision of Iran's curriculum also shows progress towards CBE; because it moves towards the changing needs of societies and improving the health of community members, it seeks to achieve the nursing position at all levels of health (from prevention to rehabilitation) to be able to expand its services at the community level,

Table 5: Comparing the job position of UCBNC graduates of SBMU School of Nursing and Linfield School of Nursing

SBMU	
Job position	Hospitals, health and medical centers, rehabilitation centers, outpatient care centers, counseling centers, and nursing services, care centers for the elderly and nursing homes, palliative care centers, pre-hospital and hospital emergencies, other settings that require care nursing in the community (family doctor's offices, schools, homes, factories, and health homes). [36]
Linfield	
Job position	Hospice centers, sanatoriums, home care centers, hospitals, centers providing health services in community settings. [37-39]

Table 6: Comparing expected outcomes of UCBNC

Graduates of SBMU School of Nursing and Linfield School of Nursing		
SBMU		
Outcomes	Communicating to the patients, their families, and other members of the health team, providing care based on the nursing process, lifelong learning, training to the clients, their companions and families, management and organization of health centers. ^[36]	
Linfield		
Outcomes	Integrating knowledge from the art and science of nursing, evidence-based practice in order to provide comprehensive, quality, compassionate, ethical, legal support and care and compatible with social justice, taking into account the values, cultures, diverse perspectives of individuals, families, groups,	

communities and populations, communication,

collaboration and effective participation intra- and

but what is obvious is that the goals and vision of the curriculum are not aligned in some ways; for example, identifying the needs of the clients with a research perspective, as mentioned in the goals of the curriculum, is not in line with the vision of the curriculum. In this regard, Talebi et al. and Radrazm et al. found that the research issue has been neglected in the vision, which is consistent with the results of the present study. [27,46] Therefore, it's important to pay attention to this issue.

interprofessional.[37-39]

The general goal of the SBMU School of Nursing is to educate efficient nurses needed by the community in order to improve the health level of the community. [36] While Linfield School of Nursing has emphasized the role of students in responding to community needs as one of the important elements of CBE, [38] whereas attention to such a case has been neglected in Iran's curriculum. The results of Baghaei et al.'s study showed that the need to train able and competent nurses who are responsive to the changing needs of the community (e.g., the increase of the elderly population, palliative care, prevention, and acute care) has increased and is important. [16] Borzou et al. do not consider the goals stated in the present curriculum to be in line with the existing conditions and the

community's needs. [47] Therefore, the education of nurses who can respond to the community needs should be considered in the goals of Iran's curriculum.

The curriculum of Linfield School of Nursing is derived from the community-based nursing education model, a comprehensive and complete model that guides designing the curriculum based on the background, conditions, and needs of the target community.[37-39] Whereas the curriculum of SBMU School of Nursing is designed based on the medical education model, it is focused on disease and treatment, and it's taken from nursing undergraduate courses in other countries. Inconsistent with the present study, the results of various studies showed that Iran's education model is derived from the medical model of Western countries and focuses on treating diseases; for this reason, it does not according to the community needs and is not designed based on the existing situation and cultural conditions of the community and lacks any indigenous perspective. [19,21,24,48] Therefore, localizing Iran's curriculum according to the context of the community seems to be necessary and essential to improve the health of the community.

The content of the curriculum is selected in such a way that its goals are realized.[31] A comparison of the characteristics and structure of the community-based nursing undergraduate course shows that the structure is different in the two schools. The content of Linfield School of Nursing is in line with the goals, philosophy, mission, and vision of the curriculum, and the topics of social justice, communication, society, cultural diversity, practice, and evidence-based research are emphasized in the curriculum that helps to integrate knowledge and theory into practice, while there is some inconsistency between the courses offered in Iran and its content to the education goals and vision of the curriculum. The inconsistency of courses to the local conditions, context, and community needs and following that, the gap between theory and practice^[19,21,30] and as well as weakness in management training and nursing interventions in disasters^[4] is one of the things that can be seen in the present curriculum in Iran. The focus of the existing content is mostly on the treatment of the disease, and there is not much emphasis on prevention. The results of various studies showed that there is some inconsistency between the lessons and content presented with the education goals, philosophy, mission, community needs, cultural, and local conditions of the community in Iran, and it needs to be revised, [19,21,24,30,31] which has caused a gap between theory and practice.^[49] While paying attention to it reduces the gap between nursing theory and practice and focusing on lessons, according to the community needs is one of the suggestions presented in various studies.[19,26-28,48] Also, the results of many studies showed that in Iran's

undergraduate curriculum, the content of courses such as communication, cultural diversity and providing health care services to multicultural societies, community and providing community-oriented services, social justice, evidence-based practice, nursing management and interventions in disasters, integration of lessons units in a theoretical and practical form have been neglected, and they have suggested revising the curriculum based on the mentioned cases, which is consistent with the present study. [4,5,14,16-20,27,28,31]

The results of the comparison of the job position of the graduates showed that although the curriculum of Iran, like the curriculum of the Linfield School of Nursing, emphasizes most of the setting, places, and levels of the community as the job position of the graduates, most of the graduates are working in hospitals and the position and role of the nurse in level one and three prevention is not clear. In Iran, despite the emphasis on the social, caring and supportive, educational, research, and advisory role of the nurse and the inclusion of some courses with a community-oriented perspective and contrary to the expectations mentioned in the heading of the curriculum; practically, the job position of most of the graduates is considered only in medical centers and hospitals. [16-18,28] Therefore, more effort is needed for policymakers to make appropriate finances and decisions in this regard and create suitable infrastructures and structures, also establishing the position and clarity of the community-based nurse's role can be an effective solution to reduce existing problems.

Comparing the outcomes expected from the graduates showed that the outcome of effective communication of students in both schools is similar. The outcome of Linfield School of Nursing is to train students to provide care based on culture, law, and social justice^[38] which is ignored in Iran's curriculum, and the result of the present curriculum is lifelong learning and nursing process in order to identify the health needs of clients and patients. [36] In this regard, Adib Hajbagheri et al. have stated that expecting graduates who only have the skills to communicate, provide care based on the nursing process and life-long learning, as a consequence of the curriculum, show a simple-minded of the position of nurses in the healthcare system of the country. [19] Pourteimour et al. have reported that nurses should be prepared for management and policy-making roles and be entrepreneurial persons who provide care based on legal and cultural principles with an emphasis on social justice.[14] According to the results obtained and the mentioned studies, it is necessary to revise the dimensions of the nursing curriculum in Iran in order to achieve the vision of the program.

In general, according to the comparisons, what seems to be that the community, its characteristics, texture, context, and needs have not been emphasized in the current curriculum, attention to treatment and lack of attention to the community has led to the education of nursing students being directed toward the hospitals. Thus, the students cannot acquire the necessary competence to respond to the community's needs. On the other hand, infrastructures such as not determining the position of nurses at different levels of health in the community have created obstacles; for this reason, the necessary efforts to expand the services and education of students at the community level are either not done properly correctly or do not reach results. As a result, in addition to revising and reforming the curriculum, the community-based curriculum needs the support of policymakers, nursing managers, and structural reform. One of the strengths of the present study, we can point out the examination of the undergraduate nursing curriculum in terms of being community-based, its dimensions and model, which had not been done as yet.

Limitations and recommendation

The limitation of the present study was the limited number of articles about the Linfield School of Nursing, the lack of interviews with professors and students of that faculty, and the scattered information available on the school's website. In addition to collecting information on the website of this university, one of the authors had corresponded through e-mail to the relevant university officials to get more comprehensive content to reduce the above limitation and received this information. Also, it is suggested to researchers examine other education models used in the design of nursing curriculums of successful universities in the world to improve the quality of education.

Conclusions

There are major differences between the curriculums of the two faculties in the structure of the course, philosophy, mission, goals, the model used in the design of the program, the job position of the graduates, and the outcomes of the program, and there is little similarity. The vision of undergraduate nursing in Iran indicates the movement towards CBE, but it seems that the content of all aspects of the program does not achieve such a vision. In addition to the inconsistency between its dimensions, the main elements of CBE including communication, community, cultural diversity, health, social justice, stakeholder engagement, evidence-based practice, and responding to community needs in the current curriculum are ignored or weak. Also, the focus of the existing education is on treatment and disease, changing the setting of nursing education from hospital to community and preparing students for it is a suitable solution to deep learning of graduates in facing the problems of the community and empowering nurses and improving the quality of education. Therefore, it seems necessary to revise and localize the curriculum in all its dimensions based on the community-based nursing education model, in accordance with the background and community needs in order to solve the weaknesses of the current curriculum so that can be achieved to the maximum productivity and efficiency of nurses using meet the community needs.

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