

REPORT: PARTNERS' MEETING ON SCALING UP OF NURSING AND MIDWIFERY EDUCATION HELD AT THE UNIVERSITY OF KWAZULU-NATAL WORLD HEALTH ORGANIZATION COLLABORATION CENTRE (WHOCC) FROM 27–28 APRIL 2010

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INTRODUCTION

Dr Mary Moleki and I attended the World Health Organization (WHO) meeting at the University of KwaZulu-Natal during the latter part of April 2010. Delegates represented the Africa World Health Organisation Collaborating Centres (WHOCCs) of the following countries, Kenya, Nigeria, Tanzania, Zambia, Malawi, Lesotho, Botswana and South Africa. Mrs Margaret Phiri, the Regional Nursing Adviser of the African Office of the WHO (AFRO), and Mrs Makhosi Ntuli, WHO Representative, South Africa, were present as well as a number of WHO representatives from Geneva Headquarters. David Benton the president of the International Council of Nurses (ICN), and the Acting Registrar of the South African Nursing Council, Ms Sizu Mchunu were also present.

BACKGROUND

Countries all around the globe, especially in the African region, are feeling the impact of the global deficit of skilled health workers particularly much-needed doctors and nurses. The extent of the crisis is now widely acknowledged. The need to strengthen and expand the professional health care work force, through increased clinical and institutional capacities and strategies to improve retention, is high on the agenda of a broad range of stakeholders, including multilateral and bilateral organisations, the private sector and civil society.

The 2006 World Health Report was dedicated to human resources for health; the same year the World Health Assembly adopted a resolution to urge rapid scaling up of the health care workforce. Many of the WHO countries and regions have made commitments and implemented strategies to increase education of health care workers. Similarly,

many other players have advanced a variety of possible directions, each according to their own capacities or perspectives. The United States President Emergency Fund for AIDS Relief (PEPFAR) has committed to support the production of 140 000 new health workers by 2013 with a particular emphasis on doctors and nurses; the Global Fund, is strongly supporting countries to submit proposal for strengthening health systems, including Human Resources for Health (HRH); and Japan International Cooperation Agency (JICA) has committed to train 100 000 more health workers in Sub-Saharan Africa (SSA).

The United Nations (UN) and its member states have, through the High Level Task Force on Financing, emphasised the urgent need to produce new health workers. The Task Force on Scaling-Up Education and Training for Health Workers produced a 10-year plan for scaling up the production of health workers, and the issue was addressed at the G8 meeting in Italy in 2009. The health workforce crisis has also been recognised among wider constituencies, including the private sector, philanthropic organisations and civil society.

The situation in the WHO AFRO region

In Sub-Saharan Africa, the human resources for health crisis is at a critical stage. For example, with 11% of the world's population and 24% of the global burden of disease, it has only 3% of the world's health workers. According to a report published in 2004 by the International Council of Nurses (ICN), "The scarcity of qualified health personnel, including nurses, is being highlighted as one of the biggest obstacles to achieving the Millennium Development Goals (MDGs) for improving the health and well being of the global population".

Nurses are the "front line" staff in most health systems, and their contribution is recognised as essential to meeting these development goals and delivering safe and effective care.

The shortage of nurses is especially acute in certain countries in Africa – particularly Sub-Saharan Africa where AIDS has impacted dramatically on the nursing workforce. The ICN estimates a shortfall of more than 600 000 nurses in the Sub-Saharan countries just to meet the MDGs (ICN, 2004).

There is a need to scale up production of health workers, particularly nurses and midwives. The need to review approaches to medical and nursing education is of relevance to current health reform efforts in many countries. The sheer scale of the challenge in many low- and middle-income countries in Africa demands immediate attention and investments.

In 2008 the WHO, with support from PEPFAR and the United Nations Programme on HIV/AIDS (UNAIDS), published global guidelines on task shifting which recommended the adoption or expansions of a task shifting approach as a method of strengthening and expanding the health workforce to rapidly increase access to HIV and other health

services. The WHO, over the past year, has also examined positive synergies between targeted health initiatives, such as PEPFAR, JICA and country efforts to build health and human resources capacity to deliver health services.

Building on this work, WHO and PEPFAR convened a meeting in October 2009 in Geneva to help plan and initiate a new WHO/PEPFAR collaboration to transform and scale up nursing and medical education in resource constrained countries, with a special focus on Africa.

Developing and implementing strategies to scale up production of health care workers, particularly doctors and nurses, will involve concerted interventions in several areas such as curricula development and or revision; decentralisation of education; innovative educational methodology and technology; quality assurance and performance mechanisms; educational resources and infrastructure; training and retention of faculty; regulatory frameworks; and links with the national HRH planning, recruitment and retention among others. Developing evidence-based policy guidance will entail taking the following steps: evidence gathering and analysis; definition of knowledge gaps; original data gathering in countries; definition of innovative frameworks to link medical and nursing educational programmes to enrolment; and technical cooperation with countries and other stakeholder towards successful implementation of the guidance among others.

OBJECTIVES OF THE INFORMAL CONSULTATION

The Durban meeting was a follow-up event after the WHO/PEPFAR meeting. The main objective of the meeting was to gather information; discuss the key areas of intervention to scale up and improve the quality of education of nurses to complement the information gathered in October 2009; and agree on the steps forward, including the development of a regional plan of action towards the development of policy guidance to transform and scale up nursing education.

The specific objectives were to

- gather information about innovative educational solutions, ground-breaking educational methodology, regulatory frameworks, and links to HRH planning
- present promising academic partnerships in scaling up nursing education and discuss ways to expand them
- discuss the key areas of intervention to scale up nursing education and identify issues and challenges
- develop a draft Regional Plan of Action towards the development of policy guidance to support countries in scaling up nursing education.

The participants

This partners' meeting brought together representatives from the Ministries of Health, medical and nursing education institutions, WHO Collaborating Centres, policy strategists, professional associations and regulatory bodies and practitioners.

FACTS ILLUMINATED DURING DISCUSSIONS

Inhibiting or negative factors were identified and discussed, including the following:

- Departments of education and health do not speak and link up with each other.
- Countries do not have specific HR plans in line with their healthcare needs.
- There are inadequate physical facilities.
- There are severe shortage of tutors and faculty members (only 6.6% of nurses in Africa have a post graduate qualification).
- Remuneration is inadequate in faculty.
- Retirement ages of 55, and 60.

Positive aspects were also identified such as that:

- regulatory councils are focused on maintaining standards and quality
- information technology is successfully applied in the training of nurses, even for clinical courses

REQUIRED ACTIONS

- A growth of 140% is required to produce an additional 800 000 nurses in SSA.
- Funding partnerships should focus on human resource development (HRD) for clinical, education and management training.
- Look for innovative strategies to scale up the production of nurses and faculty members.
- Task shifting should be used to maximise the best use of health care workers' skills and expertise.
- Nurse graduates have to be increased drastically to enhance capacity for the development of leaders.
- Recruitment of non-practising nurses is necessary.
- The compulsory retirement ages should be (postponed).

- A consortium for capacity building of nurses in foreign countries should be developed.
- The parameters of specific health care needs must direct the HRD activities (for instance, mother and child, midwifery and public health).
- Leaders need to be trained to manage services, and training/educational institutions.
- Pressure groups, consisting of different health care categories, should be created within countries to activate governments to realise and attend to the healthcare crisis.

At the end of the first two days of presentations, most delegates left, leaving a team of 15 colleagues consisting of Ms Yean Yan from the WHO Head Office in Geneva, Mrs Margeret Phiri, the WHO Afro regional director, directors of WHOCCs (UK-N, Botswana, Unisa), Ms Thandi Managane from the South African Department of Health (DoH), leaders of programmes in different African Countries (Kenya, Zambia, Malawi, Lesotho) and Prof Leana Uys, to develop an up-scaling strategy for nurses in Africa.

UP-SCALING STRATEGY FOR AFRICA

The modus operandi was that a summary of the previous two days' presentations was made to identify the priority needs, important variables, and deterrents. From these summaries, three key areas for consideration were identified, namely:

- Leadership and management in nursing education
- Quality of nursing education
- Increasing the numbers

These three areas were explored during workshop sessions, and a document was compiled which will be finalised by Mrs Phiri. Once finalised, this document will be distributed widely amongst decision makers in the African countries.

Ms Mangane undertook to provide feedback on this meeting and its findings to the South African Department of Health.

REFERENCE

International Council of Nurses. 2004. *The global shortage of registered nurses: an overview of issues and actions*. Available from:<http://www.icn.ch/global/shortage.pdf>. (Accessed on 14 February 2008).