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Partnership in Action: A Case Study in Nursing Workforce and Leadership Development in East Africa

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Partnership in Action: A Case Study in Nursing Workforce and Leadership Development in East Africa

Professor Sharon Brownie
Dean, School of Nursing & Midwifery
Aga Khan University, East Africa

STTI 27th International Nursing Research Congress - 21-25 July 2016 - Cape Town, South Africa
Impact Evaluation Study

Purpose: The purpose of this presentation is to present a case study highlighting the strategies and outcomes achieved in developing nurse leaders in East Africa. The case study emphasizes the importance of collaborative partnerships in developing nurse leaders in education and practice.

Target Audience: The target audience of this presentation includes government officials, policy makers, nurse educators, nurse managers and nurses in practice.

Author: Professor Sharon Brownie

RN, RM, BEd, MEd Admin, M Hth S Mgt, MA Mgt (N), GAICD, FCNA, DBA

Disclosure Statement: No conflict of interest is present in respect to the evaluation study reported in this presentation. The impact evaluation is a jointly funded by the participating partners, namely, AKU University and Johnson & Johnson Corporate Citizen Trust.
Learning Objectives

The attendee will

• Understand key strategies required to successfully build nursing workforce capacity and leadership in a developing context
• Gain insight into the essential contribution of collaborative partnerships
• Obtain knowledge of the methods used to measure outcomes in nursing workforce development
• Receive insights regarding the context of nursing education and workforce development in East Africa
Abstract

East Africa suffers an inordinate burden of disease and does not have the numbers of suitably qualified nurses and midwives to address this challenge.

Focussed efforts in nursing workforce capacity building are needed.

This presentation involves a case study in which university private-public partnerships have successfully contributed to nursing capacity enhancement.

This presentation outlines specific details of capacity building strategies developed and implemented along with a comprehensive range of partnerships which have contributed to capacity building efforts.
The Partners
The 15 Year Partnership

1. Workforce – capacity of 2,138 working nurses has been increased from enrolled to diploma and diploma to degree level
2. Nursing leadership had been enhanced with a significant number of graduates in key leadership positions across East Africa
3. Measurable overall gains in nursing workforce capacity
Aga Khan University
School of Nursing & Midwifery EA

• Responsible for managing AKU’s nursing and midwifery programmes across East Africa

• Integrated within a global, autonomous, not-for-profit university focused on increasing human resource and leadership capacity in the developing world
Johnson and Johnson Corporate Citizenship Trust

• Responsible for managing J&J’s Corporate Social Responsibility Programs (CSR)
• The Trust’s influence extends across 38 countries in Europe, the Middle East, and Africa, partnering with 50+ institutions.

3 Pillars of Contribution Strategy
1. Saving and improving lives of Women and Children
2. Preventing Disease in Vulnerable Populations
3. Strengthening the Health Care Workforce
Common purpose
improving health, human resource capacity and education

Shared principles
- Long-term commitment
- Investment in development of human resources
- Embrace diversity and pluralism
- Take forward innovative approaches
- Share knowledge
- Build/enhance sound institutional frameworks
- Focus on improved wellbeing of communities

Areas of engagement
- Infant and maternal health
- Early Childhood Development (ECD)
- Nurse training and profession strengthening
- Humanitarian relief

Programmes have expanded in scale and scope and are now delivered in seven countries across EMEA.
Complementary Missions

AKU-SONAM EA

• Unique mission to help build nursing HRH capacity in East Africa
• Enable and empower people in developing world to solve problems affecting their societies
• Improve the quality of their lives
• Facilitate culture as part of development
• Build bridges across communities
• Embrace diversity and pluralism

J&J Citizenship trust

• Improve the skills of health workers and community members who care for the underserved.
• Improve leadership and management in healthcare systems
• Generate long lasting and culturally sensitive solutions to health-based challenges.
• Embrace diversity and pluralism
Overview of Time-line

15 years of partnership

1998

1st partnership framework agreement established to support nursing workforce development in East Africa

1st informal discussion

Values statement exchanged

First nurses graduate from AKU East Africa

Nursing scholarships programme begins

2001

2nd partnership framework agreement established to include ECD in East Africa

Additional focus earthquake relief for Kashmir

2002

1,000th nurse graduates in East Africa

2005

3rd partnership framework agreement established to include Egypt, Portugal and Syria

Additional focus on Maternal Neo-Natal and Child Health in East Africa

2009

4th partnership framework agreement established to include Science of ECD

Provide humanitarian relief for Syria

2011

1,700th nurse graduates in East Africa

2012

Secondment programme launches in East Africa

2013

5th partnership framework agreement commences: to include new geographies, innovations and instruments

2014

2015

2016

2,138th nurse graduate Nursing Impact evaluation study
Measurable outcomes to-date

building capacity, improving quality/access and creating replicable models

• Well tested model to support working nurses while remaining in employment
  • 2 days study, 3 days work
• Upgrade from enrolled nurse to diploma
• Upgrade from diploma to BSc Nursing
• Diploma to BSc Midwifery commenced in Uganda
• Commencement of specialists diploma program in oncology nursing
• At least 50 graduates in leadership positions

2,138 nursing graduates in Kenya, Tanzania and Uganda
Evaluating Impact
The Study

Joint initiative initiated to

• Measure and evaluate impact
• Provide accountability for mutually invested resources
• Create an evidence base for future programme development
• Develop an ongoing outcome monitoring and impact evaluation (M&E) system

Ethics approval was obtained to meet requirements of studies involving human participants and ensure results could be disseminated
Evaluation Methodology

The project uses a mixed methods approach

• Quantitative data collection
  – Statistics for background and progress measures
  – Survey of alumni for effectiveness and impact

• Qualitative data collection
  – Semi-structured interviews and focus groups
  – Case studies

• Thematic analysis - drawing together findings
Methodology - quantitative

AKU alumni database, admission, enrolment and graduation registers

Statistics from WHO, UN and country official statistics provide a context of key outcome measures historically and since program started eg Infant mortality, maternal mortality, workforce numbers

Alumni survey – rather than create a separate survey, worked in partnership with the AKU Student Affairs Office to update questions in the core alumni survey and to add specific questions about the impact of the AKU SONAM programs the alumni completed
Methodology - qualitative

Semi-structured interviews and focus groups

- Identification of key stakeholder groups
- Workshop to develop semi-structured interview pro-formas relevant for each stakeholder group
- Development of sample across the stakeholder groups to ensure coverage and yet be manageable within resources
- Country teams undertook the interviews & focus groups, took recordings, produced transcripts
- Team now codifying transcripts to qualitative analysis tool
- Thematic analysis

Case studies – identified through workshops and other forums
## Methodology - stakeholders

<table>
<thead>
<tr>
<th>Category of stakeholder/partners</th>
<th>Type of approach</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chief nurse of ministries of health</td>
<td>1-1 interview</td>
</tr>
<tr>
<td>Directors of nursing and providers of nursing education</td>
<td></td>
</tr>
<tr>
<td>Registrars of nursing council</td>
<td></td>
</tr>
<tr>
<td>Professional associations</td>
<td>1 focus group of approx. 6</td>
</tr>
<tr>
<td>Nursing council management team</td>
<td>1 focus group of up to 6 people</td>
</tr>
<tr>
<td>County/district nurse chiefs</td>
<td>Focus groups of up to 6 people</td>
</tr>
<tr>
<td>Hospital employers / boards</td>
<td>1 private sector group</td>
</tr>
<tr>
<td>Hospital Matrons/DNS/Hospital admin.</td>
<td>1 faith-based</td>
</tr>
<tr>
<td>Clincics/pharmacies</td>
<td>1 government</td>
</tr>
<tr>
<td>AKU Graduates of Dip or BScN</td>
<td>1 rural</td>
</tr>
<tr>
<td>Government/private/faith-based/-------------------------------</td>
<td>4 or 5 others</td>
</tr>
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Operational Lessons

Innovative methods were needed to locate alumni & improve response rates

• Use of mobile technologies
• Support to access wifi connection in remote areas
• Social media links among alumni

Maintaining alumni interaction

• Pre-2009 few alumni had emails – difficult to find
• Alumni want to be engaged with AKU
• Constant email for life – essential future development
• Continued strengthening of alumni community
Early Findings
## Early Findings

Graduates are in strategic leadership positions on national, county, and institutional levels.

<table>
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<tr>
<th>Country</th>
<th>Position</th>
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<tbody>
<tr>
<td>Tanzania</td>
<td>Academic Head at Masana College of Nursing</td>
</tr>
<tr>
<td>Tanzania</td>
<td>District Nursing Officer: Kibaha District Council</td>
</tr>
<tr>
<td>Tanzania</td>
<td>Chairman Deputy of Nursing Council</td>
</tr>
<tr>
<td>Tanzania</td>
<td>In-Charge Theatre Department: Mnazi Mmoja Hospital</td>
</tr>
<tr>
<td>Kenya</td>
<td>Chief Nursing Officer: Aga Khan University Hospital</td>
</tr>
<tr>
<td>Kenya</td>
<td>County Cabinet Secretary: Kijiado County</td>
</tr>
<tr>
<td>Kenya</td>
<td>Head of Department Examination: Nursing Council</td>
</tr>
<tr>
<td>Kenya</td>
<td>County Director- Hospital CEO</td>
</tr>
<tr>
<td>Uganda</td>
<td>Ag. Assistant Commissioner for the Ministry of Health</td>
</tr>
<tr>
<td>Uganda</td>
<td>Director of Nursing with the UMHO</td>
</tr>
<tr>
<td>Uganda</td>
<td>Principal of Mulago School of Nursing and Midwifery</td>
</tr>
<tr>
<td>Uganda</td>
<td>President of the Uganda Nurses and Midwives Association</td>
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Early Findings

- Successful dispersion to rural and urban corners of East Africa
- Qualitative interviewing and Focus Groups have shed light on:
  - The relevance of AKU courses
  - Support for East African curriculum collaboration
  - Challenges of access
  - Demand for further development of nursing programmes to Masters level & beyond
Early Findings – Qualitative Feedback

• Quality
  “The nurses who graduate from AKU, they come with confidence, they are enthusiastic, and they are always interested.......they don’t let go, they don’t surrender before they accomplish their tasks..... They want to champion everything”- County Head

• Relevance
  “They are very relevant [the skills from AKU], I apply them on a daily basis.... “Almost all my courses helped me through my career roles”- Graduate
Early Findings

• Access

“I did not know I could go back to school... [but] those who are at AKU are given all the resources and even supported with finances” - Rural Graduate

“The distance discourages people, otherwise I would have liked many nurses to upgrade” – County Head

• Impact

“The impact has improved the quality of Nursing Care”- Hospital Head

“The content is of high quality and made me advance to Masters Studies....It made me reach there” - Graduate
Early Finding – study intent

Large numbers indicated the intent to pursue further study in the next two years, specifically BScN to Masters (153) followed by continued Post RN BScN (128).
Early Finding – employment change

The completion of an AKU qualification resulted in promotions for 264 respondents within two years, 88 had pay rises while 143 had no change.

Did completion of that qualification result in a change to your employment within two years?

- No: 143
- Yes, pay rise in same job: 88
- Yes, promotion in same job: 206
- Yes, promotion to another organisation: 58
- Yes, change to another profession: 13
- Other: 30
- Did not answer: 17
Early Finding – areas of improvement

Professional Competence (288) was the main improvement that nurses believed they gained from their AKU degree, followed by enhanced Nursing Practices (107).
Current Status of Impact Study

• Raw data from the alumni survey has been received
• Focus groups and interviews transcription completed
• Analysis has commenced
• Final report due late September
• Publication options currently being identified
Data analysis and reporting

A range of research outputs will be produced:

- Report of statistics from AKU alumni survey
- Report on qualitative survey with case studies
- Donor reports
- Research articles of specific issues identified in qualitative survey
- Development of online tools with East African Institute, AKU
Dissemination

Findings will be widely disseminated and will be accessible via:

• Partner websites
  – AKU SONAM
  – J & J Corporate Citizen Trust
• Peer-reviewed publications
• Conference papers
• Case studies, highlighting graduate leadership roles and contributions
Finally – Reflecting on Partnerships

Why was a partnership necessary

• Nurses are back-bone health services with significant benefits for ongoing capacity building
• Often poorly paid
• Philanthropic partnership with scholarship options essential to address issues of inequality & access to higher education

What make a partnership work

• Shared mission and common purpose
• Trust & mutual respect
• Continuous communication
• Accountability and delivery
• Measurable benefit