



# Nursing and complex humanitarian emergencies: Ebola is more than a disease

Elizabeth Downes, DNP, MPH, CNE, FAANP, ANEF<sup>a,b,\*</sup>

<sup>a</sup>Nell Hodgson Woodruff School of Nursing, Emory University, Atlanta, GA

<sup>b</sup>Carter Center, Liberia Mental Health Initiative, Atlanta, GA

## ARTICLE INFO

### Article history:

Received 16 November 2014

Accepted 22 November 2014

Available online 1 December 2014

### Keywords:

Complex humanitarian emergencies

Ebola

health care providers

training programs

## ABSTRACT

To effectively address the Ebola outbreak in West Africa, it must be viewed in terms of the connections between health, politics, security, the environment, and poverty. For the people in the countries involved and those responding, it is more than the viral illness. Although the medical management of the disease is far from simple, it is really only the proximal event of much greater social upheaval in the region, creating what is known as a complex humanitarian emergency (CHE). This article describes a course to introduce nursing students to CHEs and the role of nurses in the field of global response. CHEs are becoming more frequent with high death and disease rates. Nurses must become familiar with their complexity and multifaceted response. Although the planning for the course predated the current epidemic, the Ebola outbreak in West Africa served as an excellent exemplar for the health sector response in CHEs.

**Cite this article:** Downes, E. (2015, FEBRUARY). Nursing and complex humanitarian emergencies: Ebola is more than a disease. *Nursing Outlook*, 63(1), 12–15. <http://dx.doi.org/10.1016/j.outlook.2014.11.010>.

## Introduction and Background

When speaking of Ebola viral disease, many people, especially health professionals, use the acronym EVD. However, EVD does not begin to capture the complexity of the situation. EVD is the viral illness. Although the medical management of the disease is far from simple, it is really only the proximal event of much greater social upheaval in the region, creating what is known as a *complex humanitarian emergency* (CHE). CHEs are defined as “a humanitarian crisis in a country, region or society where there is total or considerable breakdown of authority resulting from internal or external conflict and which requires an international response that goes beyond the mandate or capacity of any single and/or ongoing UN country programme” ([Complex Humanitarian Emergencies, n.d.](#)). Although schools of nursing across the United States have been scrambling to include information about EVD into their classroom,

community, and clinical experiences, few, if any, are preparing their students in any way to respond to CHEs. This article describes a course to introduce nursing students to CHEs and the role of nurses in the field of global response. Although the planning for the course predated the current epidemic, the Ebola outbreak in West Africa served as an excellent exemplar for health sector response in CHEs.

According to the [World Disaster Report \(2014\)](#), there have been over 6,500 reported disasters in the past decade. A disaster is defined as “a serious disruption of the functioning of a community or a society involving widespread human, material, economic or environmental losses and impacts, which exceeds the ability of the affected community or society to cope using its own resources” ([Disaster, n.d.](#)). Using this definition, the Ebola outbreak can clearly be seen as a disaster. However, the situation in West Africa is far more complex. The connections between health, politics, security, the environment, and poverty should not be overlooked. To

\* Corresponding author: Elizabeth Downes, 1520 Clifton Road, Atlanta, GA.

E-mail address: [edownes@emory.edu](mailto:edownes@emory.edu) (E. Downes).

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<http://dx.doi.org/10.1016/j.outlook.2014.11.010>

effectively address the Ebola outbreak, it must be understood in these terms. Environmental and societal pressures including urbanization, deforestation, and poverty all contributed to the conditions that potentiated the largest outbreak of Ebola to date (Bausch & Schwartz, 2014). Furthermore, in the epicenter of the outbreak, there is a long history of political instability and weak health systems. Each of the countries has recent histories of civil unrest, and, although the political situations had been relatively stable, the lack of trust in public and poorly resourced institutions added fuel to the fire.

Even before this outbreak, CHEs were becoming increasingly more frequent with high death and disease rates. Health care workers are on the front lines in every disaster and CHE, and, regardless of their specific discipline, they should have a fundamental understanding of how various health care roles align to address urgent needs to protect health, needs ranging from simple sanitation and hygiene to nutrition, disease prevention, and management of acute and chronic illnesses with severely limited resources. Although numerous public health and specialty organizations have published curricula describing their specialty preparations for disaster medicine and public health preparedness (Gebbie & Qureshi, 2002; International Council of Nurses, 2009; Jakeway, LaRosa, Cary, & Schoenfisch, 2008; National Organization of Nurse Practitioner Faculties, 2007; Walsh, L., Atman, B., King, R., & Strauss-Riggs, 2014), few, if any, are incorporating them into their formal educational programs at any level.

## Course Description

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In response to the need for a better understanding of the knowledge, skills, and aptitudes needed to care for persons in the context of CHEs, faculty at Emory's Nell Hodgson Woodruff School of Nursing partnered with colleagues at the Centers for Disease Control and Prevention (CDC) to develop and deliver a course titled "Introduction to Complex Humanitarian Emergencies for Nurses (CHEN)." The course was designed to complement courses already in existence at Emory's Rollins School of Public Health, and great care was taken to align relevant public health competencies (Walsh, L., Atman, B., King, R., & Strauss-Riggs, 2014) with nursing competencies (International Council of Nurses, 2009), which helped identify gaps in both areas. Médecins Sans Frontières/Doctors Without Borders (MSF) and other Non-Governmental Organizations (NGOs) that provide refugee-related services served as additional faculty. The NGO staff provided lessons from direct field experiences. As suggested by Schor and Altman (2013), the course focused on instructional competencies as opposed to workforce competencies.

The CHEN course introduced students to the field of CHEs with an emphasis on the expanded roles that nurses perform in humanitarian crises. The course included didactic presentations and active learning

exercise to examine the provision and management of care and opportunities for leadership. Day 1 included an overview of CHE; a comparison of CHEs with natural disasters; the context in which CHEs occur; and a description of agencies and United Nations clusters active in mitigation, preparedness, response, and recovery. Nursing roles were highlighted and emphasized. This section was led by the course co-coordinator, a senior nurse epidemiologist at the CDC's Emergency Response and Recovery Branch.

After the overview, the focus turned to care of the self, specifically to safety, security, and mitigation of risk in complex environments. This section was led by an expert with years of experience with CARE, an international relief and development NGO, and as a security risk reduction consultant. Students then took part in an exercise that introduced the Sphere guidelines, which are used by the global humanitarian community to define common principles and minimum standards in core areas of humanitarian assistance. The in-class exercise focused on the Sphere health sector. Additional key aspects of humanitarian work were addressed through the Sphere Handbook in Action e-learning course (<http://www.sphereproject.org/learning/e-learning-course/>). By completing the certification and modules outside of class, students got the "big picture," learning about sectors other than health. This expanded their understanding of CHEs and the importance of collaboration among sectors.

During the class, students also learned about infectious diseases in CHEs from a senior epidemiologist in the CDC's Division of Global Migration and Quarantine. Having just returned from a deployment in West Africa, the speaker brought up-to-date information about the Ebola outbreak. This discussion enabled students to examine the causes and context surrounding the outbreak and relate the situation to the previous lecture on CHE. Using a case study approach allowed students to integrate the Sphere guidelines within the context of the current CHE related to the Ebola outbreak.

MSF took leadership for the content on nutrition and the role of the nurse in clinical intervention. Students explored the expanded nursing roles in the provision of clinical care within the limited resources and political environments of a CHE using Ebola outbreak as an example. Two MSF staff members facilitated this section, one of whom was a nurse who had just returned from Nigeria, having closed the MSF Ebola Treatment Unit (ETU) in that country. Through a rich interaction with this nurse, students were able to construct a view of the nurse's clinical role in an outbreak. Students saw the role of a nurse from bedside caregiver in an ETU to hospital manager to public health nurse doing rapid assessments and surveillance.

In addition to the role of the nurse in the Ebola outbreak and ETUs, students explored the broader role nurses play in other CHE responses through discussions on nutrition interventions, vaccination programs, and reproductive health and gender violence. These sessions were led by MSF staff and nurses from

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