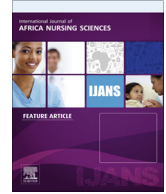




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Increasing human resource capacity in African countries: A nursing and midwifery Research Summit



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ABSTRACT

Background: As global efforts to increase the nursing and midwifery workforce intensify to improve access and quality of healthcare, clinical nursing and midwifery research must increase concomitantly to provide a solid evidence base for these clinicians. To maximize research resources in resource-poor regions, the research team collaborated with regional experts in southern and eastern African countries to convene a Research Summit in Nairobi, Kenya. Objectives were to: build a network of midwifery and nurse scientists, identify regional gaps in knowledge and priorities for their research, develop strategies that address these gaps, and initiate a mentorship plan.

Purpose: To review methods leading up to organizing and convening as well as the evaluation of the aforementioned Research Summit.

Methods: A two-day regional Summit was convened; appropriate experts from 12 countries participated. In a year-long collaborative process, regional experts and research priorities were identified; during the Summit, a fluid agenda incorporated findings from workgroups. Summative evaluations were completed by participants and planners.

Results: Through the Summit, a network of regional research experts was established; peer mentoring was initiated; research priorities were confirmed; regional action plans to address clinical nursing and midwifery research priorities were developed; and technical task forces and a steering committee were formed. Evaluations from participants, planners and core collaborators were collected. Follow up reports have been submitted by technical working groups.

Conclusions: Evaluations provided favorable feedback regarding the process leading up to as well as the content of the Research Summit. While further long-term evaluations will be needed to determine the sustainability of this initiative, the Summit format afforded the opportunity for regional experts to meet, examine research priorities, and develop strategic action and mentorship plans. This paper describes a replicable method that could be utilized in other regions using available resources to minimize costs and modest grant funding.

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1. Background

As the largest proportion of health care professionals, a robust, locally relevant evidence-base for nurses' and midwives' practice is critical. This is particularly true in countries and regions with limited human resources for health care and a heavy disease burden (World Health Organization, 2014), where providing access to

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quality health service is difficult (Hatt et al., 2015; World Health Organization, 2013).

While there is a global shortage of nursing and midwifery faculty and limited nursing and midwifery research, this is particularly evident in African countries, despite introducing higher education in nursing. Besides facing a lack of research funding and inherent challenges within the local healthcare system (Kombe, 2015), many nursing and midwifery schools have, of necessity, focused on pedagogy with minimal reflection on the process and outcomes to improve on quality (Klopper & Uys, 2013). Furthermore, to improve global health and primary health care delivery, understanding current nursing needs, practices, and outcomes is vital. This requires research expertise to identify priorities and gaps and to collect and critically analyze data to ensure research is aligned with critical gaps in the evidence; some evidence suggests funding and research may be misaligned with critical regional nursing research priorities (Sun, Jia, & Larson, 2016).

Research has a wide ‘social impact’ – the ability to bring about change – on teaching practice and subsequent clinical research practice (Bligh, 2000). In Sub-Saharan Africa, largely because of the impact of the HIV pandemic, there is an upsurge of communicable and non-communicable diseases coupled with poor progress on maternal, infant and child mortality and morbidity. Nursing scope of practice is changing in Sub Saharan Africa (Crisp & Chen, 2014; World Health Organization, 2014); as a result, this is a critical time within the nursing and midwifery profession to re-examine the current state of nursing and midwifery research and research priorities.

In an attempt to address some of these issues, a modest grant was obtained at a major institution in the U.S. Aims were to establish cross-regional core working groups and a database of nurse and midwifery leaders involved in research and program evaluation in southern and eastern Africa; plan and convene a Research Summit and develop regional work plans, including outcomes to be accomplished, timelines, work products (publications), key collaborators, mentoring resources and programs (Webinars, videos, curriculum), future funding proposals and funding sources. Specific goals for the Research Summit were to identify regional gaps in knowledge and priorities for nursing and midwifery research and mentorship, recommend strategies that address these gaps, develop a mentorship plan with access to a pool of regional and global nurse and midwifery research experts, and disseminate recommended strategies with a mentorship approach to pave the way for sustainability and replication. The purpose of this paper is to describe the development of a regional panel of experts; the organization, implementation and evaluation of a Research Summit; and the success of the Research Summit in achieving the aims above.

2. Methods

An overview of the methods is presented in Fig. 1. As a first step, an environmental scan of clinical nursing research was conducted. An environmental scan is a term that refers to the collective methods used to assess and understand information, in this case the state of clinical nursing and midwifery research. The components of this environmental scan included a scoping review of indexed literature, a review of the grey literature, identification of regional experts and a subsequent Delphi survey of these experts (Hatch & Pearson, 1998). These were conducted within the region defined by the United Nations (Table 1, United Nations Statistics Division (2013)), with the assistance of regional core collaborators which included key organizations and individuals who held nursing leadership positions in major universities in Kenya, Malawi, and South Africa, as well as leadership roles in international nursing

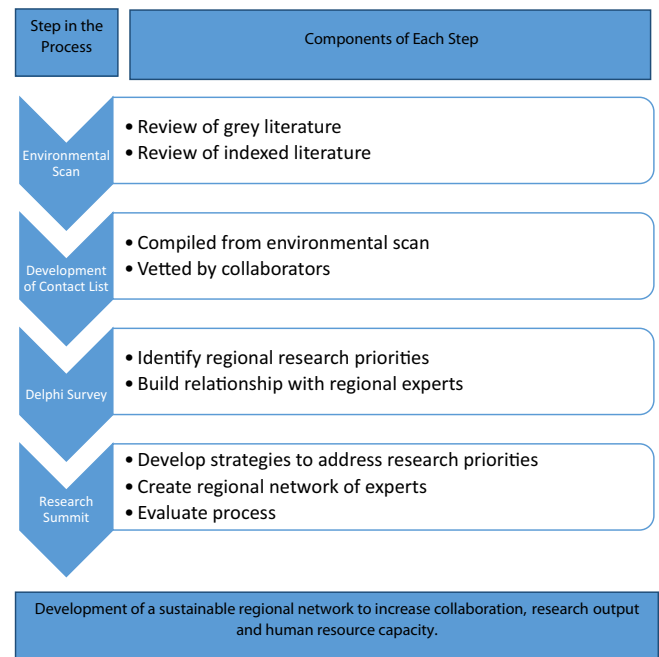


Fig. 1. Overview of the steps used to increase human resource capacity in African countries.

Table 1

United Nations geographical regions and Research Summit participants from countries in eastern and southern Africa.

Eastern Africa	Number invited per country	Number attended per country
Kenya	13	13
Malawi	4	3
Mozambique, Uganda, United Republic of Tanzania, Zambia, Zimbabwe	1	1
Ethiopia, Rwanda	1	0
<i>Southern Africa</i>		
South Africa	4	4
Botswana, Lesotho, Namibia, Swaziland	1	1

organizations. The senior officer on human resources for health at the World Health Organization regional office for Africa (WHO AFRO) also served as an advisor to the project.

Core collaborating organizations included: The Forum of University Nursing Deans in South Africa (FUNDISA): a unified platform of the heads of all 22 university schools of nursing in South Africa to pursue excellence in nursing scholarship at Universities in South Africa and promote nursing practice, research, and education in collaboration with other stakeholders (<http://fundisaforchange.co.za/>); University of Malawi Kamuzu College of Nursing; University of Nairobi School of Nursing Sciences; Lugina Africa Midwives Research Network (LAMRN, 2016); and The Confederation of African Midwives Associations (Africa Midwives Research Network, 2016). The project was approved by the initiating institution's Institutional Review Board (IRB).

The purposes of the environmental scan were to obtain a more complete understanding of the state of regional clinical nursing research and gaps in the existing literature, and to develop a list of contacts of existing clinical nurse scientists in southern and eastern African countries. This step was accomplished through a scoping review of indexed literature and a scoping review of grey literature which are discussed in depth elsewhere (Sun & Larson, 2015; Sun et al., 2016). In the process of scanning the existing research in the region, an initial list of clinical nursing and mid-

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