



Perspectives of nursing faculty in Africa on global health nursing competencies

Nicole Warren, PhD, MPH, CNM^{a,*}, Rachel Breman, MSN, MPH, RN^b,
Chakra Budhathoki, PhD^c, Jason Farley, PhD, MPH, NP, FAAN^a,
Lynda Law Wilson, PhD, RN^d

^aDepartment of Community-Public Health, Johns Hopkins School of Nursing, Baltimore, MD

^bUniversity of Maryland School of Nursing, Baltimore, Maryland

^cDepartment of Acute and Chronic Care, Johns Hopkins School of Nursing, Baltimore, MD

^dPAHO/WHO Collaborating Center on International Nursing, University of Alabama at Birmingham School of Nursing, Birmingham, AL

ARTICLE INFO

Article history:

Received 4 December 2014

Revised 19 October 2015

Accepted 9 November 2015

Available online 23 November

2015

Keywords:

Global health

Global nursing

Competencies

ABSTRACT

Background: It is important to define global health competencies for health professionals. To date, we know little about perspectives of nurses in Africa where environments are particularly challenging.

Purpose: The purpose was to describe perceptions of nursing faculty in Africa about global health competencies and compare those to faculty from the Americas.

Methods: A 32-item online survey with a convenience sample of nursing faculty.

Results: Data from 63 nurses in 21 African countries and 618 in the Americas were analyzed. Competencies related to Social and Environmental Determinants of Health were awarded relatively higher scores. Competencies related to globalization of health and health care were ranked relatively lower. This was similar across regions.

Discussion: Nursing education should address the social implications for health.

Conclusion: Participants in all three regions considered Social and Environmental Determinants of Health as a priority. These data help set educational priorities in a setting where educational and training resources are limited.

Cite this article: Warren, N., Breman, R., Budhathoki, C., Farley, J., & Wilson, L. L. (2016, APRIL). Perspectives of nursing faculty in Africa on global health nursing competencies. *Nursing Outlook*, 64(2), 179–185. <http://dx.doi.org/10.1016/j.outlook.2015.11.016>.

Introduction

Two important trends are influencing nursing education. The first is an increasing focus on global health among health professions, including nursing (Merson & Page, 2009; Wilson, 2011). The second is the paradigm shift toward competency-based education

(Anema, 2009). Competency based-education ensures that graduates have the knowledge, skills, and attitude they need to enter the workforce (Anema & McCoy, 2009) and is uniquely focused on learner performance and outcomes (Pijl-Zeiber et al., 2014). The trend toward competency-based education is not limited to the global North. The Nursing Education Partnership Initiative (NEPI), a multicountry initiative to improve

* Corresponding author: Nicole Warren, Department of Community-Public Health, Johns Hopkins School of Nursing, 525 N. Wolfe Street, Baltimore, MD 21205.

E-mail address: nwarren3@jhu.edu (N. Warren).

0029-6554/\$ - see front matter © 2016 Elsevier Inc. All rights reserved.

<http://dx.doi.org/10.1016/j.outlook.2015.11.016>

nursing and midwifery preservice education in six Sub-Saharan Africa countries, includes competency-based curricula as one of its key programmatic strategies (Middleton et al., 2014). Previous work by Wilson et al. (2012) and Ventura et al. (2014) described the perceptions of nursing faculty in the Americas about the global health competencies that should be integrated into undergraduate nursing programs. The findings suggested that the proposed competencies were essential for baccalaureate nursing education.

If such global competencies are to be developed, it is essential to consider the perspectives of African nurse educators. To date, we know little about their perspectives although nurses dominate the African workforce (Soucat, Scheffler, & Ghebreyesus, 2013) and, along with midwives, provide >80% of all health care services in the region (World Health Organization, 2015). This is a daunting charge in a context where training resources are poor, burden of disease is high, and work environments are among the most in the world. In this setting, the populations' health care needs simply cannot be met without competent nurses to perform key skills.

Therefore, the aim of this study was to describe the perceptions of nursing faculty in Africa about proposed global health competencies to be considered for integration into undergraduate nursing programs. A second purpose was to compare perceptions about global health competencies of African nursing educators with perceptions of nursing faculty from Latin America, the Caribbean, Canada, and the United States (Wilson et al., 2012). These data will provide an opportunity to consider how important these global health competencies are to educators in Africa and consider those competencies in light of the existing International Council of Nurses (ICN's) competency framework and ongoing regulatory challenges in the region (Kendall, Bryar & Mogotlane, 2012).

Theoretical Framework

The ICN Competency Framework was developed to identify what a generalist nurse should be competent to do on entry into the profession. The framework helpfully distinguishes between different cadres of nurses. The focus of this study was on competencies associated with a registered nurse, defined as "a self-regulated health care professional who works autonomously and in collaboration with others" (ICN, 2008, p. 7). ICN's framework provides a backdrop against which to examine the global health competencies proposed by Wilson et al. (2012) and evaluated in this study.

Methods

We used a nonexperimental, cross-sectional design to conduct an on-line 32-item survey with a convenience

sample of African nursing faculty. The survey included questions about the responder's faculty role, 30 proposed competencies, and an open-ended question in which respondents could comment on other competencies they felt were important.

Sample

Like Wilson et al. (2012), we used a nonprobability voluntary convenience sampling procedure for recruitment from nurse faculty in Africa. As such, we could not estimate the sampling frame. Recruitment was carried out using two main strategies. First, we announced the survey to recognized networks of nurses in Africa including the listserv for the Global Alliance for Nursing and Midwifery and the NEPI, an initiative to develop health workers in low-resource settings in Africa. In addition, authors forwarded the survey's recruitment e-mail to their networks of health and nursing organizations and leaders in Africa. We encouraged contacts to send the survey link to their own network of nursing colleagues. Potential participants were invited to complete the survey online using the SurveyMonkey platform. A small number ($n = 6$) of surveys were collected via hard copy from nursing educators in the Democratic Republic of the Congo while the first author was working there. After the introductory message, a reminder e-mail was sent through the same channels a few weeks before the survey closed. The study was approved by the Johns Hopkins Medicine Institutional Review Board. Respondents were informed that their completion of the survey indicated their consent to participate in the study.

To meet our second aim of comparing perceptions of African nurse educators with those of faculty from the Americas, we accessed the database used by Wilson et al. (2012).

Survey Tool

The survey tool is the same as that used for a survey of nurses in the Americas (Ventura et al., 2014; Wilson et al., 2012). This tool was adapted from a list of global health competencies originally developed for medical students and was revised by Wilson et al. with permission from the original authors. The content validity of this tool is supported by previous research which documented a high level of agreement supporting these competencies among 618 nurse educators in Canada, Latin America, and the United States (Ventura et al., 2014; Wilson et al., 2012). The instrument also has a high level of internal consistency reliability (Ventura et al., 2014; Wilson et al., 2012).

For the present study, we used the English and Portuguese survey versions originally used by Wilson et al. (2012) and Ventura et al. (2014). We also developed a French language version. After an initial translation from English to French by a native-English speaker with full professional proficiency in French,

Download English Version:

<https://daneshyari.com/en/article/5870858>

Download Persian Version:

<https://daneshyari.com/article/5870858>

[Daneshyari.com](https://daneshyari.com)