

THE GLOBAL NURSE CAPACITY BUILDING PROGRAM

Producing and Maintaining a Skilled Nursing Workforce in Ethiopia

In Ethiopia, over one-third of health care providers are nurses and midwives, and in many regions, they provide the majority of patient care. A severe health worker shortage, however, is placing considerable strain on the existing workforce, hindering Ethiopia's ability to combat malaria, HIV, tuberculosis, and other illnesses that contribute to the country's high disease burden. Sufficient numbers of adequately trained nurses and midwives are needed to address essential population-based health care needs.

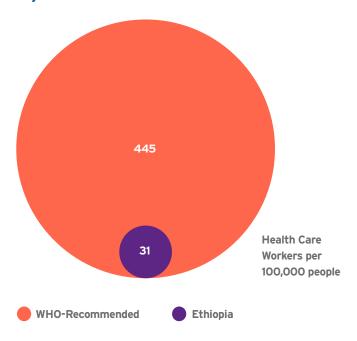






In 2009, the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) began the Global Nurse Capacity Building Program (GNCBP) in Ethiopia to support the Federal Ministry of Health's (FMOH) effort to address the health workforce shortage (Figure 1). Implemented by ICAP at Columbia University through the U.S. Health Resources and Services Administration (HRSA), GNCBP aims to improve population health by fostering individuals, institutions, and networks to expand, enhance, and sustain the nursing and midwifery workforce.

Figure 1: A dramatic need for health workers



GNCBP consists of two projects, the Nursing Education Partnership Initiative (NEPI) and General Nursing (GN). NEPI supports the production of a new workforce by enhancing nursing and midwifery education through infrastructure development, curriculum reform, faculty capacity building, and clinical training in partnership with the FMOH at three educational institutions:

- · Addis Ababa University School of Nursing
- Arba Minch College of Health Sciences
- University of Gondar Nursing School

GN promotes the maintenance of a skilled workforce by supporting continuing professional development, leadership, policy, and regulation for trained nurses in partnership with the FMOH, Ethiopia Nurses Association (ENA), and Ethiopia Midwives Association (EMWA).



The HRSA-supported GNCBP Program has focused its nurse strengthening efforts in six core areas of education and practice development as shown in Figure 2 below.

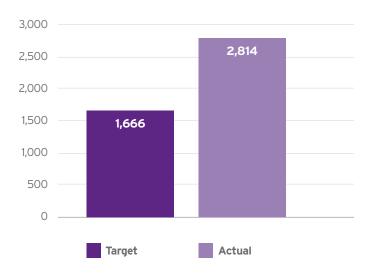
Figure 2: GNCBP core components



KEY NEPI ACHIEVEMENTS

Through NEPI, participating educational institutions were able to graduate increased numbers of nurses and midwives to address the critical health workforce shortage in Ethiopia. NEPI Ethiopia surpassed its target of new health workers graduated from pre-service education programs (Figure 3).

Figure 3: New health workers graduated from pre-service programs in NEPI-supported schools in Ethiopia from April 2012-March 2017



The quality of nursing and midwifery education was improved through NEPI support in enhancing nursing education institutions' infrastructure, curricula, faculty capacity, and clinical training.

"My tutors were with me all the time, the equipment and supplies were sufficiently available, and we had enough opportunities to practice at clinics and in communities."

Etenesh Woldesemaiat, nursing student at Arba Minch College of Health Sciences

Robust educational infrastructure

Infrastructure was enhanced at the three NEPI partner schools to facilitate up-to-date, safe, and innovative learning environments for students. Infrastructure enhancements included:

- Clinical simulation labs that allow students to practice clinical skills on electronic mannequins
- Libraries that ensure faculty and student access to up-todate textbooks and learning resources
- Computer labs with expanded internet access to ensure faculty and student access to online learning and web-based educational resources and literature
- Vehicles for transporting faculty and students to rural clinical practicum sites

Competency-based curricula

NEPI supported the development, revision, and implementation of curricula for 25 nursing and midwifery degree programs at three partner schools, including Diploma (2), Bachelor of Science (12), Master of Science (9), and the first PhD programs in the country (2). Curricula were transformed to be competency-based and up-to-date with the latest HIV care and treatment guidelines. NEPI convened a national pre-service curriculum forum with the Federal Ministry of Education (FMOE), ENA, EMWA, and seven educational institutions to exchange experiences in curriculum development.

Capable faculty and administrators

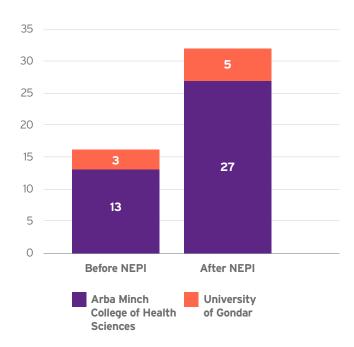
Educational institutions are only as strong as their teachers; so, in addition to strengthening the learning environment, NEPI supported access to higher education and continuing professional development for faculty of NEPI partner schools. Over 1,689 faculty members received training through NEPI, with:

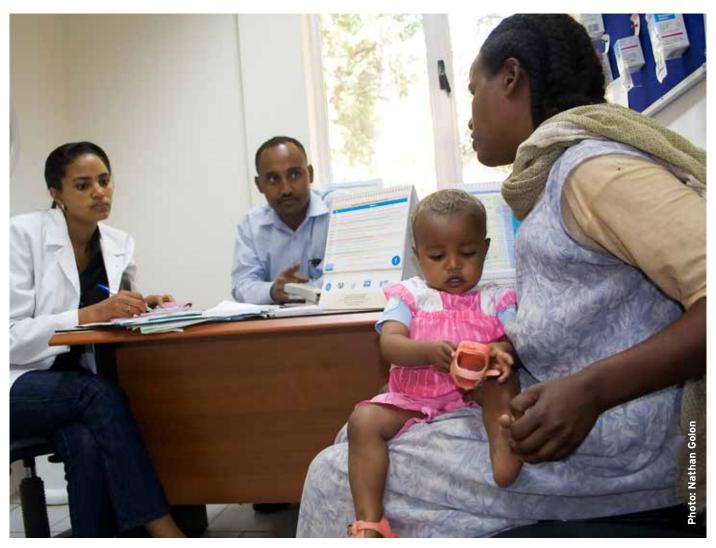
- Teaching skills, including clinical simulation, e-learning, problem based learning (PBL), and exam preparation
- Clinical care, including comprehensive antiretroviral therapy (ART), basic emergency obstetric and newborn care (BeMONC), cervical cancer screening, and prevention of mother to child transmission of HIV (PMTCT)
- Research, including research methods, abstract development, and report writing, as well as support for faculty to present at regional conferences
- Administration, including project planning, program management, finance and grants management, and sustainability planning

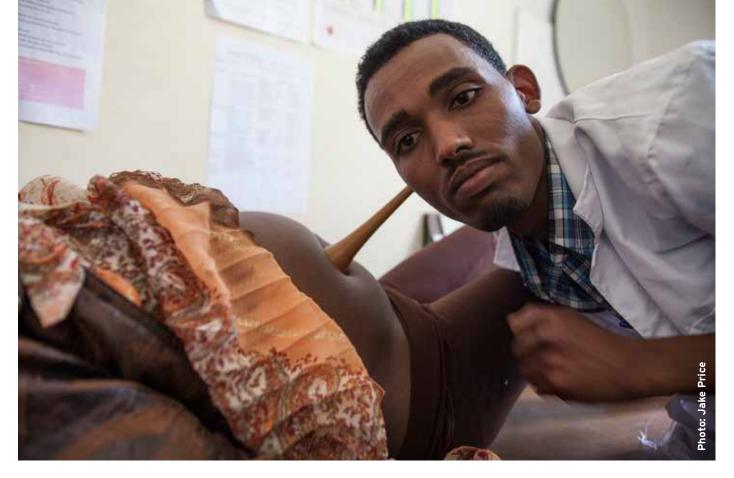
Quality clinical training

Quality clinical training is essential to ensure the knowledge students gain in the classroom translates into clinical competency and readiness for practice. Before NEPI, opportunities for clinical learning were limited due to the lack of clinical simulation equipment and the lack of clinical practicum sites with trained instructors to mentor students. NEPI addressed these shortages by developing clinical simulation training to provide students the opportunity to practice clinical skills in a safe environment before entering health facilities. More than 19,979 skills labs were successfully completed by students at NEPI-supported schools from April 2012 to March 2017. NEPI also established clinical practicum teaching sites at rural health facilities, and trained nurses as clinical educators to mentor and supervise students. With NEPI support, schools doubled the number of clinical practicum teaching sites at rural health facilities. Arba Minch College of Health Sciences (ACHS) expanded from 13 to 27 rural teaching sites, and University of Gondar (UOG) expanded from 3 to 5 sites (Figure 4). A total of 1,140 students participated in clinical practicum training at rural placements through NEPI and reported improved competence after receiving such training at rural health facilities.

Figure 4: Expanded number of clinical practicum training sites at rural health facilities







KEY GENERAL NURSING ACHIEVEMENTS

Skilled workforce

Continuing professional development is essential to ensure that nurses and midwives maintain their skills after entering the workforce and are competent to practice according to national professional standards of nursing care. GN supported the FMOH to develop standards of nursing care training materials. GN trained 236 trainers who cascaded training in standards of nursing care for 4,623 nurses and midwives from 55 hospitals, in collaboration with FMOH, Regional Health Bureaus (RHBs) and professional associations. Additionally, continuing professional development is needed to ensure nurses and midwives stay up-to-date with the latest clinical guidelines. Therefore, GN supported training 311 nurses and midwives in HIV care and treatment. Ongoing mentorship and supportive supervision is also critical to ensure that nurses and midwives who receive training are applying their knowledge in their clinical practice. Through GN, 200 nurses and midwives in 20 hospitals received with clinical mentorship and supportive supervision in collaboration with RHBs and FMOH.

Policy and regulation

Regulation of nursing and midwifery professions is critical to ensure quality and safety in clinical service delivery. GN collaborated with the FMOH, ENA and EMwA to develop standards of practice for nursing and midwifery professions and a professional code of ethics. GN further supported the FMOH to assess nursing and midwifery quality of care at 14 hospitals in nine regions of the country according to the standards, and subsequently provided supportive supervision and mentoring to ensure adherence to standards.

Leadership and advocacy

Advancement of the nursing and midwifery profession requires nurses and midwives in leadership positions who can advocate for the interests of the profession and contribute to strategic planning. GN worked in the following ways to promote nursing leadership in Ethiopia:

- Federal Ministry of Health: 50 project-affiliated nurses or midwives were promoted into leadership, management, or oversight roles in Ethiopia through GN support, including the first nursing appointment to the FMOH and nursing managers appointed to leadership boards at all district-level health facilities. GN provided technical support for FMOH in the development of a National Nursing Road Map to advance the career path for nurses in the country.
- Professional Associations: GN supported the ENA and EMwA, including development of the ENA magazine Voice of Nurses (VON) in Ethiopia, EMwA advocacy meeting on maternal and child health, and ENA advocacy and policy workshop on health workers' wellbeing and workplace safety, and participation in International Council of Nurses (ICN) congress.



THE WAY FORWARD FOR NURSING IN ETHIOPIA

GNCBP contributed significantly to advancement of the nursing and midwifery professions in Ethiopia. NEPI supported nursing and midwifery educational institutions in Ethiopia to increase the number of nurses and midwives produced and to provide students with improved quality of education through infrastructure enhancement, curricula revision, faculty capacity building, and clinical training. GN supported the FMOH, ENA, and EMWA to advance the nursing and midwifery professions by promoting a skilled workforce,

establishing professional standards of practice, and promoting nursing and midwifery leadership. The successes and progress of GNCBP in Ethiopia are extremely impressive, but the work to produce and maintain a skilled nursing workforce in Ethiopia is far from over. Key gaps remaining to be addressed include nursing leadership development, continued access for continuing professional development to ensure quality nursing and midwifery education and practice, and scale up the NEPI best practices to other institutions in the country. Continued investment is needed to ensure further advancement of the nursing and midwifery professions in order to address the health workforce shortage and improve health outcomes in Ethiopia.

ABSTRACTS AND PRESENTATIONS

"The Nursing Education Partnership Initiative (NEPI): advances in nursing and midwifery pre-service education at the University of Gondar, Northwest Ethiopia." Accra Ghana, August 1-3, 2017.

"Capacity building interventions to help nursing and midwifery students attain HIV/AIDS management competencies: The NEPI program in Ethiopia." Accra, Ghana, August 1–3, 2017.

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"Strengthening Nursing and Midwifery Education Using Clinical Simulation Techniques: Experience from Ethiopia." MEPI-NEPI symposium, Nairobi, Kenya, August 2-4, 2016.

"Success story: Poster presentation on Nursing and Midwifery Students' Rural Professional Practice Success Story." MEPUI-NEPI Symposium, August 2-4, 2016.

"Prevalence of Childhood sexual abuse at high school in Arbaminch town, Ethiopia." 7th Africa Conference on Sexual Health and Rights, Accra, Ghana, February 8-12, 2017.

"Rural Attachments in Ethiopia: Experiences of Addis Ababa University." The Nursing Education Partnership Initiative in Ethiopia, NEPI Summit, Johannesburg, South Africa, January 2015. "Strengthening pre-service nursing education for improved population health: The Nursing Education Partnership Initiative in Ethiopia." NEPI Summit, Johannesburg, South Africa, January 21-23, 2015.

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"ICAP Global Nursing Capacity Building Program." General Nursing Update, Ethiopia, March 2013-March, 2014.

"Transforming Patient Care Management: Experience with the Nursing process in Ethiopia." Global Nurse Capacity Building Program (GNCBP) Annual Meeting, Lesotho, 2014.

"Clinical simulation at NEPI supported schools in Ethiopia." Global Nurse Capacity Building Program (GNCBP) Annual Meeting, Lesotho, 2014.

"Creating and leveraging collaborative partnerships for nursing and midwifery education transformation: An example from Ethiopia." GNCBP Annual Summit Meeting, Johannesburg, South Africa, March 20-22, 2013.

"Nursing and midwifery education capacity assessment and priority areas for action." Workshop, Addis Ababa, Ethiopia, October 17-18, 2012.



Mr. Eshetu Haileselassie, Head Department of Nursing at UoG

Online at icap.columbia.edu

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