

Building children's nursing for Africa

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Twenty years into democracy, South Africa's nurses are leading the implementation of healthcare reform. Their work is grounded in human rights, notably child rights, including economic and social rights often ignored in Western societies. African values are the building blocks for protection of these rights: consensus building, mutual respect, reconciliation, hospitality and spirituality (Hungwe & Zwart 2014). These values are evident in this Special Issue highlighting nurses' efforts to integrate the evidence on preserving and promoting maternal-child health into nursing education and practice, and so prepare the workforce needed to achieve national health priorities.

Nurses' action research is laying the foundation for South Africa's re-engineered primary healthcare system, which gives effect to children's rights to quality health care and further recognises that children are not simply small adults – they require specialised treatment that includes their mothers, families and communities. Reforming children's health care in the shadow of apartheid means changing organisational cultures and practice in education and in clinical settings, from households to hospitals: a strident challenge.

The initiative to prepare nurses to meet the challenges of healthcare reform in South Africa, and simultaneously build children's nursing for Africa, is spearheaded by faculty, staff and students of the University of Cape Town's Department of Paediatrics and Child Health under the leadership of Associate Professor Minette Coetzee. The Child Nurse Practice Development Initiative includes a collaboration with Red Cross War Memorial Children's Hospital in Cape Town and with universities and children's hospitals across southern and eastern Africa.

This Special Issue stems from the First Conference on Building Children's Nursing for Africa held April 2013 in Cape Town. The meeting brought together 150 nurse educators, clinicians, administrators and students from South Africa and seven African countries to address the challenges of building a specialty in paediatric nursing to prepare a workforce for fledgling healthcare systems in resource-poor nations characterised by poverty, illiteracy, and a rich diversity of languages and cultures.

Lori Lake articulates South Africa's national vision for universal access to a healthcare system grounded in human rights. She makes the case for positioning child rights at the heart of education, training, professional codes of conduct and standards of care to transform the design and delivery of health services that support children's survival and optimal development. Lake provides context for several reports that demonstrate how nurses are using the child rights' approach to think more holistically about child well-being and the social determinants of health, and to collaborate across departments and disciplines to address complex issues that are at once clinical, social, and practical.

Neil McKerrow, chair of the Ministerial Committee on Morbidity and Mortality in Children Under 5 Years, reviews South Africa's progress toward the Millennium Development Goal of reducing the under-5 mortality rate by two-thirds by 2015. The data are potentially confusing, then encouraging, and also demanding. The statistics vary depending on source and method, but by all counts they show progress worth celebrating. South Africa's Ministry of Health is working toward standardisation; according to its numbers, in 2007 for every 1000 babies born live in South Africa, 62 died before their fifth birthday; by 2011 that number dropped precipitously to 38.5, due in part to initiatives targeting underlying conditions such as malnutrition and HIV and/or AIDS. However, those challenges persist, and the overall progress masks profound inequities. Continued progress, McKerrow argues, requires a nurse workforce better prepared to provide child-appropriate services at all levels of the healthcare system.

Neonatologist Nils Bergman presents the clinical evidence base for fundamental change in hospital policy and culture and nurses' training to support continuous and active participation of mothers

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in the care of their newborns. Bergman makes a compelling case for a policy of zero separation of mothers and infants in hospital as essential to a human rights approach to delivery of mother and child health services. Such fundamental change would reverberate through multiple government agencies, universities, hospitals and regional and local health systems.

Minette Coetzee describes a colloquium of nurse educators and administrators with representatives of a broad range of stakeholders in paediatric nursing and the transformation of health care. Her description of the colloquium format serves as a replicable model for building consensus and initiating collaborative action amongst leaders of diverse healthcare organisations. Resulting insights and recommendations are now guiding systems change necessary to build a workforce that can effectively address under-5 mortality.

Three reports demonstrate the power of participatory action research to integrate clinical findings and policy change into the culture and everyday practice in nurse education, as well as on the wards of children's hospitals. These studies make it clear that improved training alone is insufficient to effect change. Clinician researchers describe replicable processes through which hospital nurses recognised the role of signage in establishing a family-friendly environment and reducing stress for both nurses and patients' families, as well as the

powerful effects of nurses' communication with families and the value of collaborative reflection and action to produce solutions. Nurse educators in Uganda report how they achieved improvement in nurses' documentation of their assessments as a fundamental step in improving quality of care. When changes to training produced no sustained change in documentation, they collaboratively redesigned recruitment policies, staff mix, reporting forms and leadership support to achieve sustained improvement. Another action research team led a four-year process to hone a journal club to align content with revised curricula and overcome barriers to obtaining, critically analysing and applying current research, whilst providing a safe environment in which students for whom English is not their home language could practice using the scientific language of paediatric nursing.

Curationis readers dedicated to rigorous professional education, maternal and child health, effective health services delivery, staff development or healthcare reform in challenging circumstances will want to share this Special Issue widely and keep a reference copy at hand.

Reference

Hungwe, A. & Zwart T., 2014, 'Human rights through Chinese and African eyes', *New African* 538, 4–6.