THE ROLE OF MIDWIVES AND NURSES IN ATTAINMENT OF UHC

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ROLE OF NURSES AND MIDWIVES IN UHC



THE GRAND SCHEME OF THINGS

'No nurses, No UHC'.

- What makes nursing/midwifery so vital in UHC?
- Nurses and midwives do not operate in a vacuum
- Action by and for nurses regarding UHC have consequences
- Intended and intended consequences
- Requires systems view- Grand scheme of things
- Fitting into the global agenda





THE GRAND SCHEME OF THINGS: SELECTED ASPECTS OF SDG

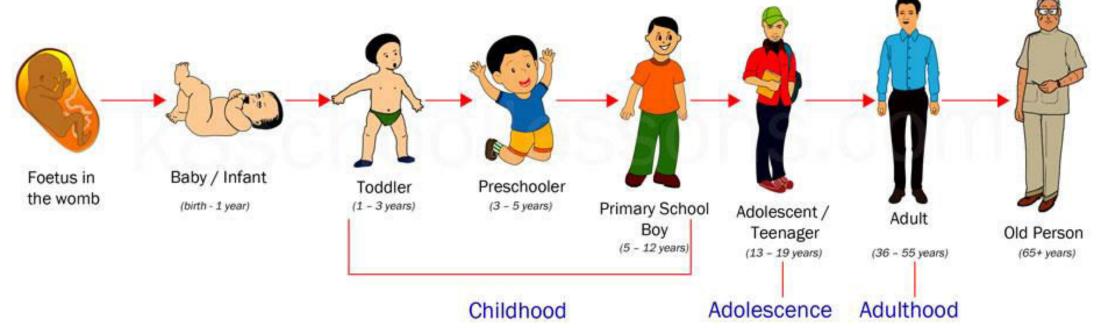
- 1. World Population =7.2 Billion
- 2. Understand the complexity (Systems approach)
- 3. Sensible goals- improve it. SDG 3: Good Health & Well Being
- ✓ leave a better world for generations
- ✓ Create a wealthy and prosperous society(inclusive, sustainable)
- ✓ Enabling environment -good governance, transparency, accountability and rule of law
- ✓ Smart Investments?
- ✓ What sectors have highest impact?
- ✓ What age group should we focus on?



CUMULATIVE INVESTMENT IN HUMAN CAPITAL ACROSS LIFE SPAN

GOOD HEALTH & NUTRITION

Health Status transmitted across generations



↑ SKILLS = Education System, Job Training, Work Experience, Building Skills V/S Human Capital. Finerease In Earnings

Courtesy: Busy.org

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NURSES&MIDWIVES IN UHC

- To who?
- Best age group to focus on?
- Why?
- The needs of different age groups?
- What is the vital role of the nurse in these stages of development?
- Would lead to identification of essential package
- The nurse in Health, Education & Training, Innovation, Economy
- Multi-sectoral collaboration

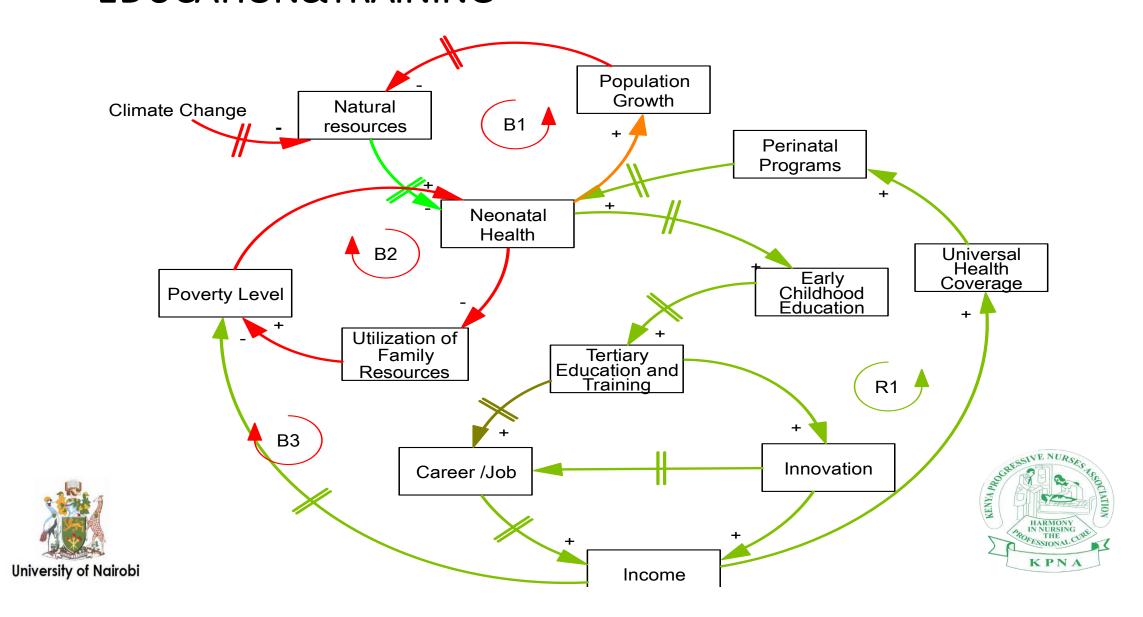
SYSTEM DYNAMICS APPROACH

- Systems thinking, UHC is not an event, Systems with interacting parts
- SD one approach -understanding and evaluating unintended consequences in complex dynamic systems
- Computer aided- qualitative causal maps and formal quantitative simulation models
- Explore and understand system behavior from a feedback perspective
- A type of qualitative Causal Loop Diagram

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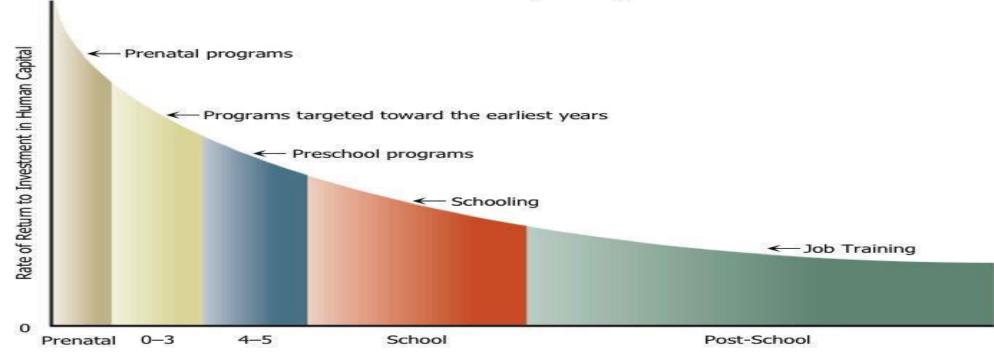
 helps to visualize the factors in a system and their positive or negative relationships with one another using lines, arrows, and feedback loops.

SIMPLIFIED CAUSAL LOOP DIAGRAM OF UHC, INNOVATION AND EDUCATION&TRAINING



EARLY CHILDHOOD DEVELOPMENT IS A SMART INVESTMENT

The earlier the investment, the greater the return





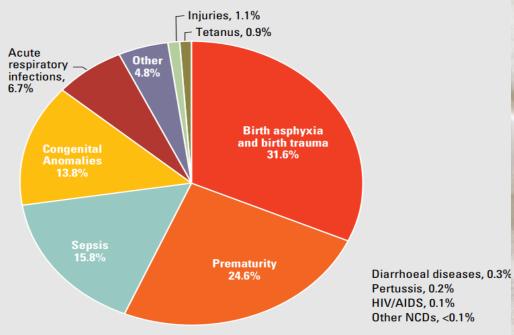
Source: James Heckman, Nobel Laureate in Economics



CRUCIAL PERIODS OF LIFE CYCLE: NEONATAL PERIOD

Kenya — Causes of Neonatal Mortality, 2015

In Kenya, the main causes of neonatal death in 2015 were birth asphyxia and birth trauma (31.6%), prematurity (24.6%), and sepsis (15.8%).¹¹





Disparities in key maternal and newborn health interventions, Kenya, 2014²

FUTURE EDUCATION CONCERNS

Formation and Brain Development

Physical Health

Mental Health

UHC Concerns



CRUCIAL PERIODS OF LIFE CYCLE: EARLY CHILDHOOD

UHC CONCERNS

- Stress-free and safe environment
- Diarrhea
- Communicable diseases
- Malnutrition
- Immune depression

EDUCATIONAL CONCERNS

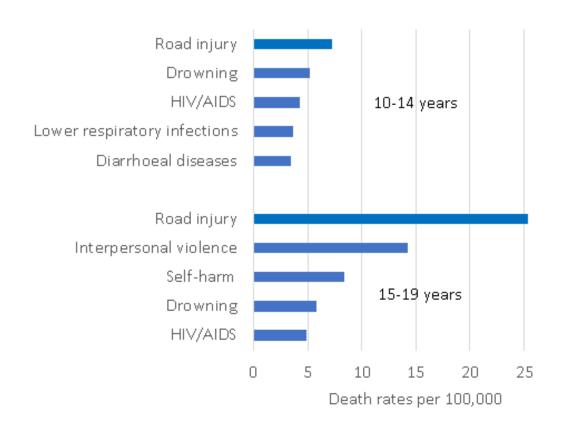
- Depends on Neonatal Health
- Stimulus for brain development
- Pre-school readiness
- Social skills & Human skills
- Life time effect on cognitive and Physical development

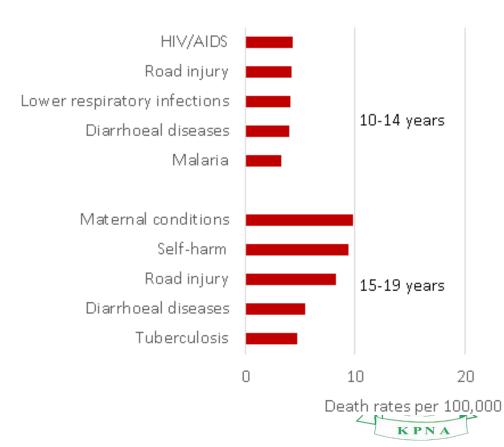




CRUCIAL PERIODS OF LIFE CYCLE ADOLESCENCE

Males Females





OTHER AGE GROUPS?

- All are important
- Futuristic views
- Use technology/ tools
- Data- information-decision
- Be proactive and NOT Reactive
- Mitigate in time
- Prepare the nurses/midwives
 - Example

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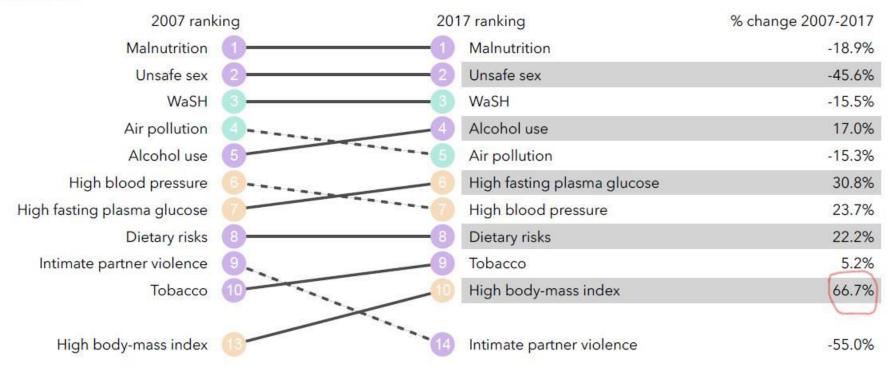
Kenya

What risk factors drive the most death and disability combined?

Metabolic risks

Environmental/occupational risks

Behavioral risks



Top 10 risk

www.healthdata.org/kenya

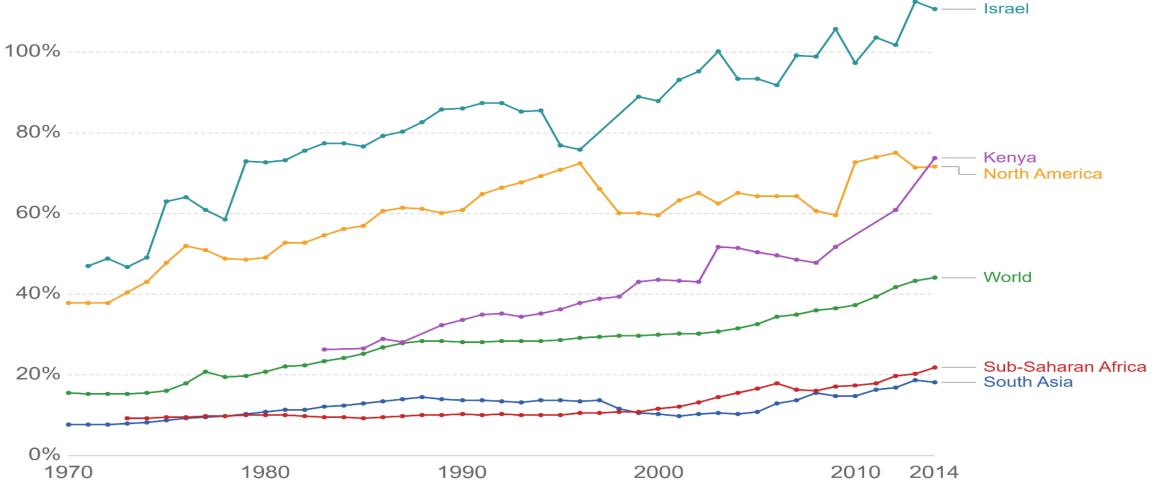
d percent change, 2007-2017, all ages, number



Gross enrollment ratio in pre-primary education



Enrollment of boys and girls in pre-primary education, regardless of age, expressed as a percentage of the total population of official pre-primary education age. The gross enrollment ratio can exceed 100% due to the inclusion of over-aged and under-aged students because of early or late school entrance and grade repetition.

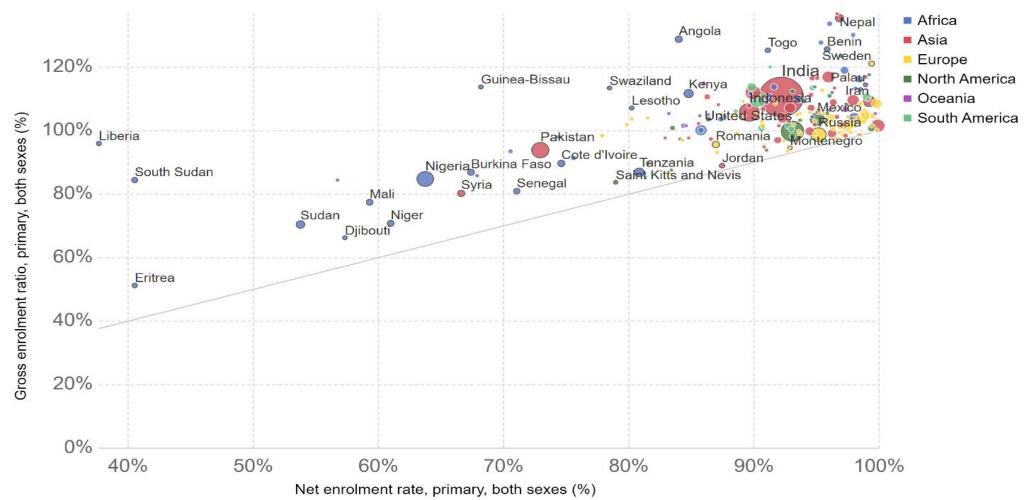


Source: World Bank

Gross vs. net enrollment rate in primary education, 2015



The gross enrollment rate is the ratio between all students enrolled in primary education, regardless of age, and the population of official primary education age. As over- and under-aged students are included this ratio can exceed 100%. The net enrollment rate is the ratio between all students in the theoretical age group for primary education enrolled in that level and the total population in that age group.





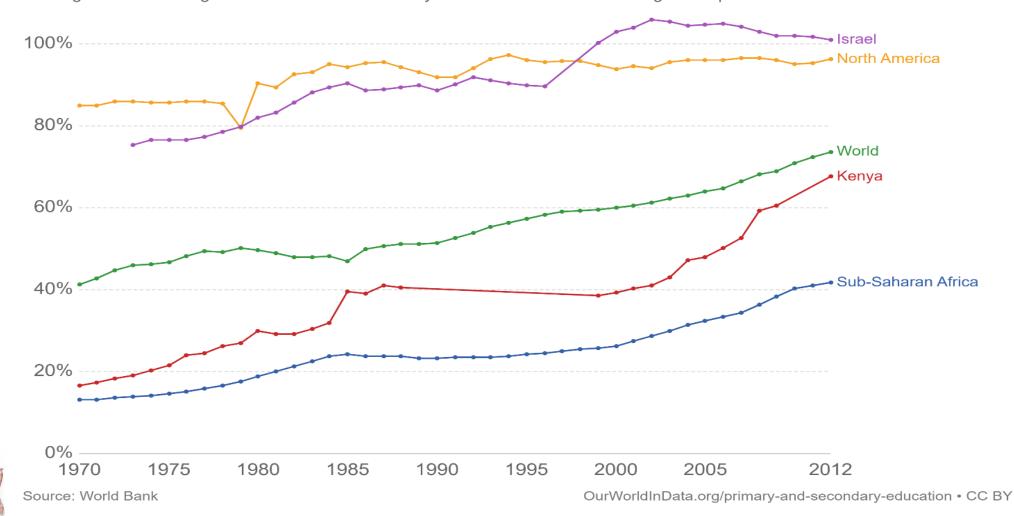
Source: World Bank

Gross enrollment ratio in secondary education

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Enrollment of young men and women in secondary education, regardless of age, expressed as a percentage of the population of official secondary education age. The gross enrollment ratio can exceed 100% due to the inclusion of over-aged and under-aged students because of early or late school entrance and grade repetition.

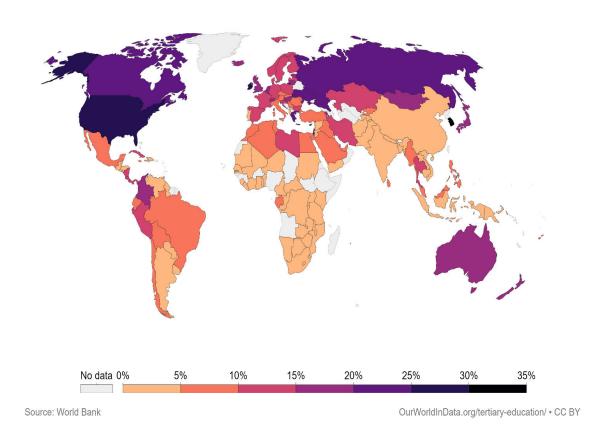


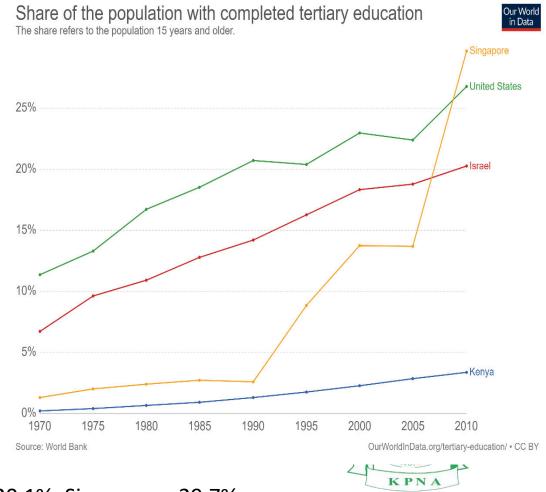
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TERTIARY EDUCATION LEVEL

Share of the population with completed tertiary education, 2010 The share refers to the population 15 years and older.





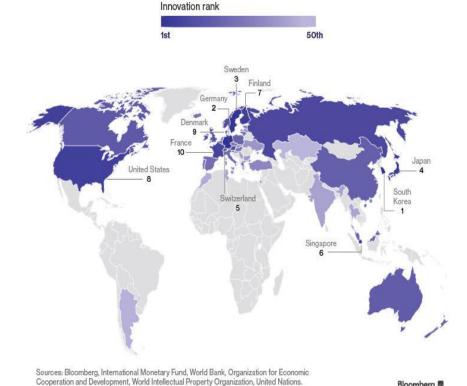


University / Tertiary Education v/s Innovations

Bloomberg #

Fifty Most Innovative Economies

South Korea has the most innovative economy, the U.S. ranks 8th



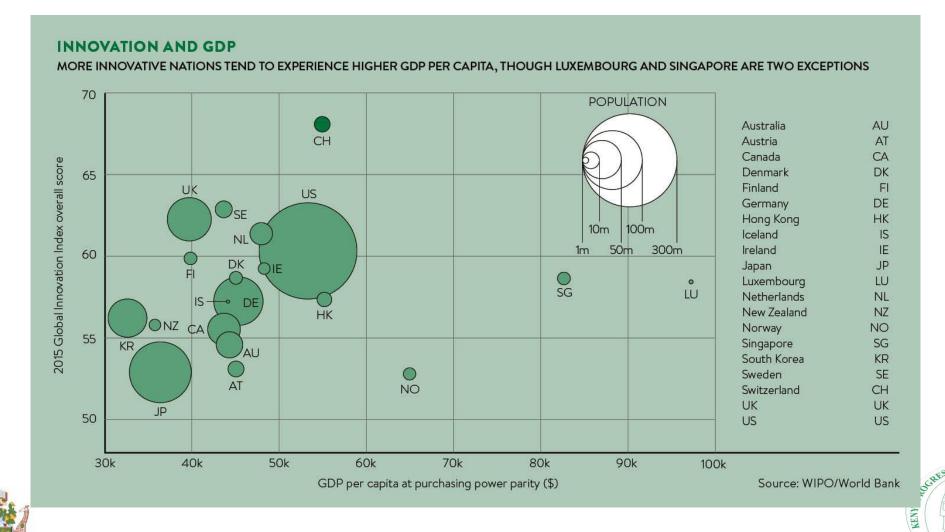
These are the world's most innovative countries

Based on Bloomberg's Innovation Index, 2018

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Country	Place change from 2017	Total score
1 South Korea	0	89.28
2 Sweden	0	84.70
3 Singapore	+3	83.05
4 Germany	-1	82.53
5 Switzerland	-1	82.34
6 Japan	+1	81.91
7 Finland	-2	81.46
8 Denmark	0	81.28
9 France	+2	80.75
10 Israel	0	80.64

Source: Bloomberg

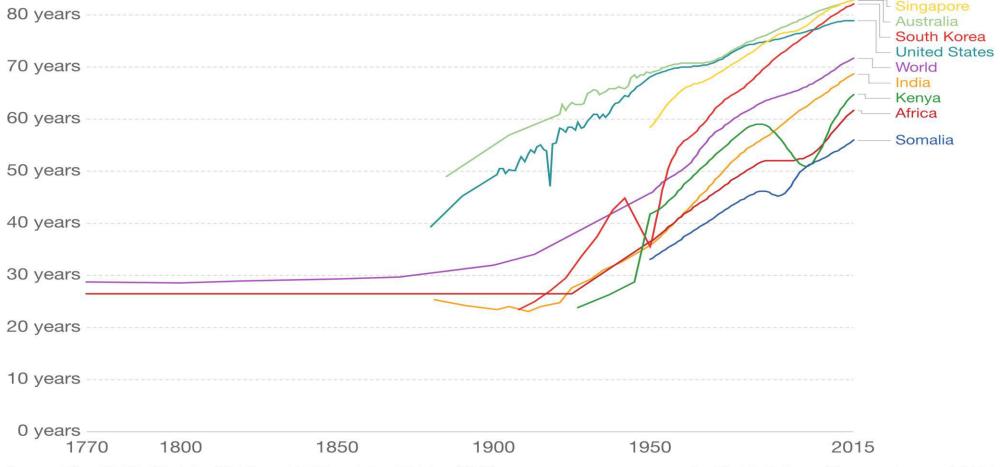
INNOVATION V/S GDP



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Life expectancy





Source: Riley (2005), Clio Infra (2015), and UN Population Division (2019)

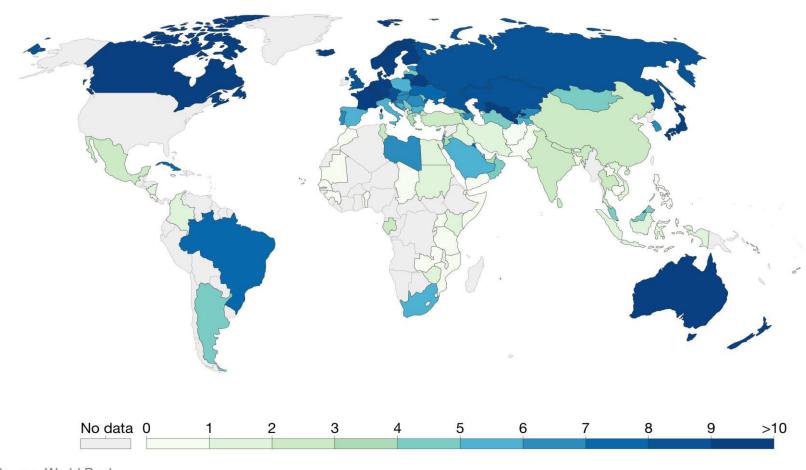
OurWorldInData.org/life-expectancy • CC BY Note: Shown is period life expectancy at birth, the average number of years a newborn would live if the pattern of mortality in the given year were to stay the same throughout its life.



Nurses and midwives (per 1,000 people), 2016



Nurses and midwives include professional nurses, professional midwives, auxiliary nurses, auxiliary midwives, enrolled nurses, enrolled midwives and other associated personnel, such as dental nurses and primary care nurses.



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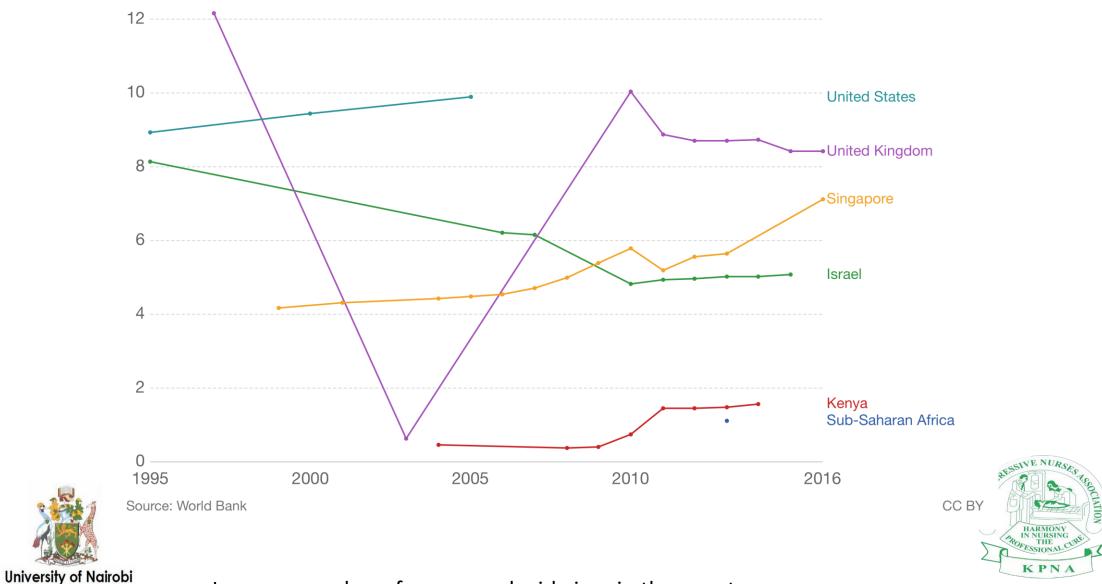
HARMONY
IN NURSING
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Source: World Bank

Nurses and midwives (per 1,000 people)



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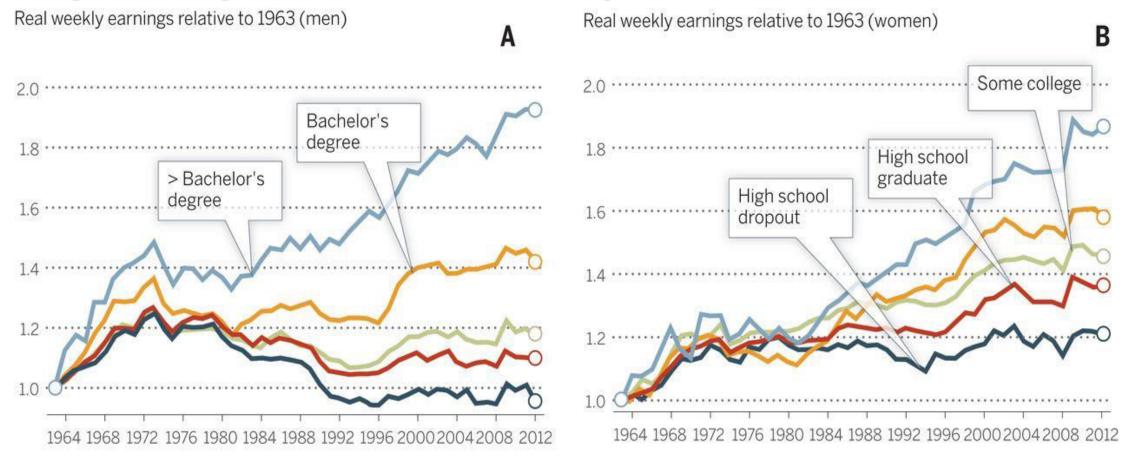
POSITION OF NURSE IN UHC

- First goal of universal health coverage is to provide all people with access to needed health services, or in other words to improve equity in service utilization.
- Operationalize the role of Nursing in UHC
- Benefit package- Illuminate covered primary health care services
- Provision of quality services
- Protection of financial catastrophe
- Education, Training and Innovation





Changes in real wage levels of full-time U.S. workers by sex and education, 1963-2012



Results are consistent across the board. Higher levels of education offer a better salary and quality of life, wherever you're living. Train nurses at Higher Levels

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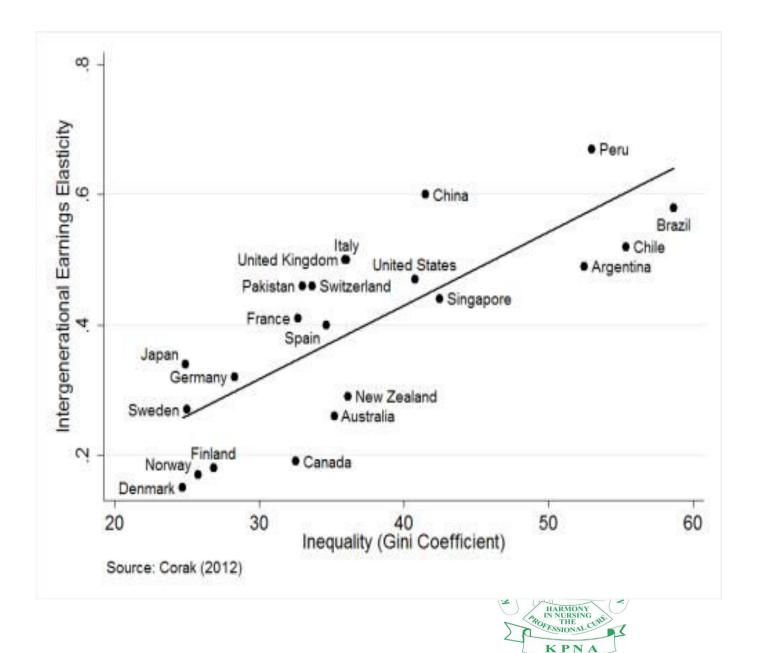
SOCIAL MOBILITY IN SELECTED COUNTRIES

Children of highly paid people are more likely to be highly paid

Children of low paid people more likely to be low earners.



ECN Training=Systematic marginalization of a profession and region?



FOCUS ON NURSES/MIDWIVES

- Operationalize the role of the nurse in UHC
- Re-orientate and emphasis PHC
- CHWS & CHEWs- Help community connect with 'formal' Health care system
- The nurse frontline /contact person
- Highly skilled and trained nurses reduces referrals and decongests the main facilities





FOCUS ON NURSES/MIDWIVES

- Invest Research & Innovations-needs based, patents
- Integrity, impact, income
- Ambassadors of UHC
- Invest and capitalize on the public trusts in nurses

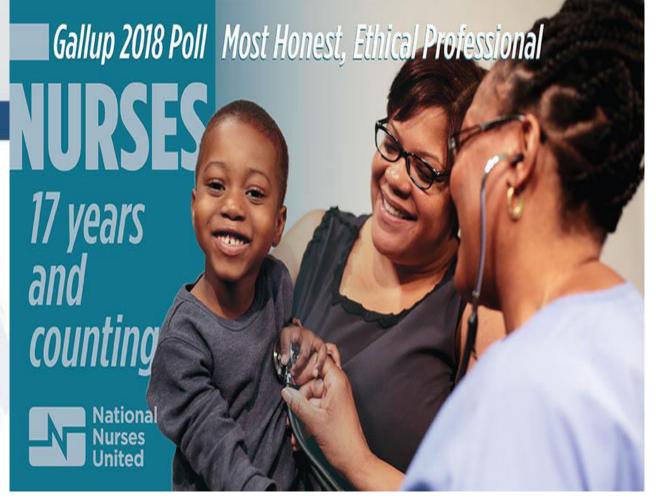






MOST HONEST AND ETHICAL PROFESSION

16 years straight at the top of Gallup's poll of America's Ratings of Honesty and Ethical Standards in Professions.



Courtesy: https://www.wisconsinnurses.org. & www. nationalnursesunited.org



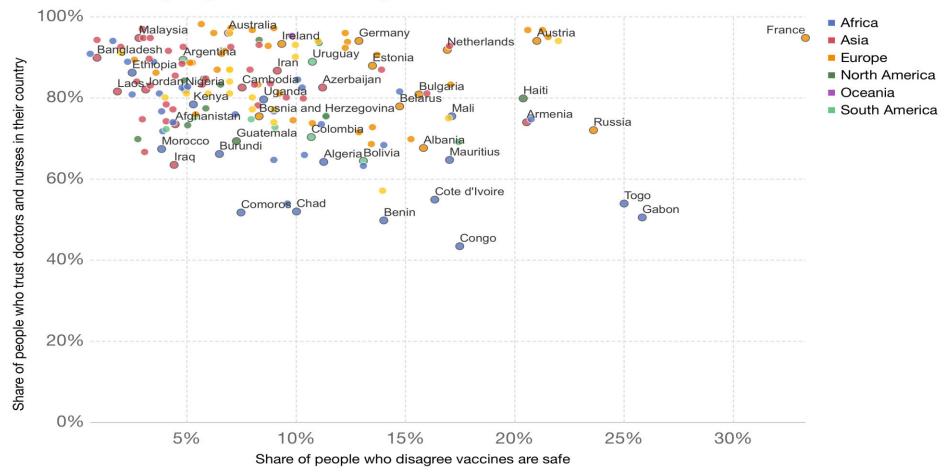


Trust in doctors and nurses vs. disagreement vaccines are safe, 2018



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The share of people who responded "a lot" or "some" to the question "How much do you trust doctors and nurses in your country? Do you trust them a lot, some, not much, or not at all?". This is measured against the share of people who answered "strong disagree" or "somewhat disagree" to the statement "Vaccines are safe."







FRONT RUNNERS FOR SUCCESS OF UHC

UHC starts with me as a citizen

All are equal citizens in UHC

Team approach, Trans-disciplinary

- 1. Nurses and Health care providers including CHWs
- 2. Teachers, educators
- 3. Farmers
- 4. Nutritionists
- 5. All others





CONCLUSION

- Systems view/ system dynamics/be part of the team
- Operationalize the role of the nurse in UHC
- School Health programs
- Invest in highly trained nurses
- Increase nurse population ratio
- Invest in research and innovation, technology
- Transformational leadership, no myopia
- No apology for growth/ progression
 - Integrity, impact, income-Global positioning



NO NURSE/MIDWIFE IS LIMITED



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