#### Nursing and midwifery challenges, obstacles and possibilities to achieve universal health coverage

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World Health Organization, Geneva, Switzerland

Global HRH Forum, Recife, Brazil, 13 November, 2013



## **Outline of the presentation**

- 1. SDNM: HSS and education
- 2. Challenges
- 3. Opportunities
- 4. Conclusion
- 5. Questions



#### **Focus of presentation**

Strategic Directions for strengthening nursing and midwifery (2011-2015)

Par strategy

Residences in succession.

Semantic St.

• collaborative action to enhance the capacity of nurses and midwives to contribute to:

- •universal coverage
- •people-centred health care
- policies affecting their practice and working conditions
- scaling up of national health systems to meet global goals and targets.





# Challenges Health systems and services

- Health trends affected by demographics, disease burden, epidemics
- E.g. 60% of deaths world wide attributable to CVD, cancers, chronic disease and diabetes, 80% occur in LMICs
- Health workforce shortages and excess- (Internal (urban/rural), international migration
- Poor deployment and utilization of nurses and midwives
- Poor uptake of PHC reforms
- Lack of inclusive, transparent and accountable leadership models
- Practice standards for people-centred care not incorporated in health service delivery



#### **Example**

#### DALYs attributed to 10 leading risk factors for the age group 15 to 59 years old in the world (WHO, 2009)





#### Nursing and Midwifery personnel, density per 1000





# Challenges Education and training

- Modest investment in health professional education
- Insufficient basic infrastructure and equipment; the educational methods are static and fragmented; severe shortages of teaching staff
- Faculty capacity in developing countries inadequate in terms of quantity, quality and relevance
- The faculty-student ratio in most developing countries high (1:45) in the classroom compared to 1:12 ratio in developed countries.
- In some developing countries only 6.6 % of the present faculty have formal preparation in education and the qualifications needed to enter, or progress as faculty in higher educational institutions.
- Lack of education standards and guidelines
- Curricula not competency base and not adaptable to a changing environment



#### **Opportunities** WHA Resolutions on HRH

2004	<ul> <li>International migration of health personnel: a challenge for health systems in developing countries (WHA57.19)</li> </ul>
2006	<ul> <li>Rapid scaling-up of health workforce production (WHA59.23)</li> <li>Strengthening nursing and midwifery (WHA59.27)</li> </ul>
2009	<ul> <li>Primary health care, including health system strengthening (WHA62.12)</li> </ul>
2010	• WHO Global Code of Practice on the International Recruitment of Health Personnel (WHA63.16)
2011	<ul> <li>Strengthening the health workforce (WHA64.6)</li> <li>Strengthening nursing and midwifery (WHA 64.7)</li> </ul>
2013	<ul> <li>Transforming health workforce education in support of universal health coverage (WHA66.23)</li> </ul>



#### **Opportunities Update on collaborative framework**

 Strategic directions for strengthening nursing and midwifery (2011-2015) for universal health coverage



Vision.....

- ....improved health outcomes for individuals, families and communities through the provision of competent, culturally sensitive, evidence-based nursing and midwifery services.
- Post 2015 MDGs
- Directed focus towards UHC and PHC reforms



### **Opportunities Implementation**

Effective policy HRH policies for nursing and midwifery

 Dissemination of tools for education quality improvements e.g. Global standards, midwifery educator competencies



- MIDWIFERY EDUCATOR CORE COMPETENCIES
- Collaboration with partners
- Technical support and selective implementation for models and case studies



### Conclusion

- Nursing and midwifery services must be responsive to the expectations of the public – patient-centered, fair, affordable and efficient
- Teamwork among all stakeholders at the global, regional, national and grass-roots levels achieved
- Nurses and midwives need to function in within interdisciplinary treatment groups as part of disease management organizations
- Competency based education that responds to country needs embracing UHC
- Strengthen nursing and midwifery response in health promotion and disease prevention
- Make available and implement tools, frameworks and strategies for improving educational and practice standards





 What are the key issues we should address post MDGs and to address UHC

UHC is defined as ensuring that all people can use the promotive, preventive, curative, rehabilitative and palliative health services they need, of sufficient quality to be effective, while also ensuring that the use of these services does not expose the user to financial hardship.

 What strategies can be employed to effectively improve the utilization of nurses and midwives for UHC



# THANK YOU



http://www.who.int/hrh/nursing\_midwifery/en/

