



# SEW NEWS

International Council of Nurses • Conseil international des infirmières • Consejo internacional de enfermeras

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## ZAMBIA –UGANDA AND MOROCCO HOST THE POSITIVE PRACTICE ENVIRONMENT WORKSHOP

The chronic underinvestment in the health sector in both developed and developing countries has resulted in a deterioration of the working conditions of health professionals worldwide. It has impacted negatively on recruitment and retention of health workers and ultimately affecting quality care and patient outcomes. To reverse this tendency, six international health organizations have joined forces to launch a campaign on *Quality Workplace for Quality Care* in view of making Positive Practice Environments a reality in health settings, ensuring health, safety and well being of staff and supporting the provision of quality patient care. This campaign is supported by the International Council of Nurses, International Hospital Federation, International Pharmaceutical Federation, World Confederation for Physical Therapy, World Dental Federation and World Medical Association.

A three-day workshop on Positive Practice

Environments (PPE) took place in Zambia 9 – 11 March and in Uganda 15 – 17 March 2010. At country level, a National Steering Committee (NSC) has been set up and a National Resource Person (NRP) has been appointed. The NSC and NRP will coordinate PPE activities and monitor in-country projects. Around 30 participants attending the workshop representing different Health Care Organizations. Participants adopted a National Project Implementation Strategy. The workshop was facilitated by Francis Supparayen, ICN Consultant and Campaign Coordinator, in collaboration with the NRP of each country. This project is implemented and financed in 3 countries namely Morocco, Uganda and Zambia. The PPE Workshop in Morocco will be held in Rabat 5 -7 May 2010. Around 25 participants from rural and urban regions are expected to attend the workshop.

*Source: News from ICN- for more information on the Campaign visit [www.ppecampaign.org](http://www.ppecampaign.org)*

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#### **4<sup>TH</sup> WORKSHOP ON LEADERSHIP IN NEGOTIATION IN RUSSIA**

The fourth and last Leadership in Negotiation (LIN) workshop will be held in Omsk in Russia 2- 5 August 2010. This 4-year project started in 2007 in Samara and workshops conducted by ICN have been successively held in Astrakhan in 2008 and Mari-El in 2009. Thirty-two participants have followed this training programme which aims at developing nurse leaders' knowledge and skills in negotiation, empowering them to advocate for better conditions of work for nurses and also influence nursing and health policies. According to Valentina Sarkisova, President of the Russia Nurses Association, this project has been very beneficial to the NNA and has made a real difference among Regional Nurses Associations leaders who have attended these workshops. They have become more assertive and confident in themselves and have effectively marketed the image of the NNA resulting in a substantive increase in membership strength. In Omsk, the regional membership grew from 60 to 80 % of the pool of nurses.

*Source: News from ICN- For more information visit: [www.icn.ch/leadneg.htm](http://www.icn.ch/leadneg.htm)*

#### **SHIFT WORK AND CANCER**

The effects of shift work on cancer, particularly breast cancer, prostate and colorectal cancer are receiving increasing interest among shift workers especially in certain Scandinavian countries. It follows a declaration by the International Agency for Research on Cancer, stating that shift work that involves circadian disruption is probably carcinogenic to humans. Recently 28 women with breast cancer who had previously worked night shifts for at least 20 years were compensated by the Danish national board of industrial Injuries. Recent meta-analysis has suggested that the risk of breast cancer is increased by around 50% among night workers and 70% in flight personnel. Possible mechanisms that may increase the risk of cancer among shift workers include light at night suppressing the production of melatonin and sleep disruption resulting in depression of immune function. The nursing profession has to ensure a round the clock service. Consequently, employers must devise means to mitigate the effects of shift work on nurses. In many western

countries considerable efforts have been made to find better shift systems such as, few and short shifts before a rest day, stable rather than rotating shift and frequent rest breaks or scheduled napping within a shift.

*Source: Article published in Medical Journal by Lin Fritschi – August 09*

#### **CUT IN SUBSIDY FOR TRAINING OF NURSING STUDENTS IN MALAWI**

The civil society organizations of Malawi have addressed a petition of protest to government following the announcement of the Ministry of Health to cease subsidizing nursing and midwifery students studying at the Christian Health Association College of Malawi. Prior to this decision Government paid USD 2392 for the training of each student who then had to pay only USD 224 to top up the difference. According to the Ministry this is due to budgetary constraints. The Executive Director of the National Organization for Nurses and Midwives, Dorothy Ngoma said that government should reverse this decision to avoid a continuous shortage of nurses in the country. Malawi has only 4450 nurses and midwives with a vacancy rate of 76%.

*Source: African Press Agency- November 2009*

#### **INDIA IMPROVES TRAINING OF NURSES**

To palliate the acute shortage of Registered Nurses all across India, the Ministry of Health is planning to open 267 Nursing Institutes. It is expected that this measure will produce at least 22,000 nurses annually and will reduce the shortage over time. According to an analysis of the Ministry of Health the density of health professionals in India is 20% less than the WHO prescription of 2.5 health professionals per 1000 inhabitants. The majority of them operate in the urban area which accounts for only one third of the population. The Minister of Health Gulam Nabi Azad has stated that to bridge this gap many of the new Nursing Institutes will be open in those unserved districts. Incidentally, India ranks at the top of nations whose physicians are working in developed countries and nurses hold the second position behind the Philippines. According to a report of the Ministry of Health, nurses have been under utilized in a doctor-centric system and

traditionally have a low position in the health workforce hierarchy.

*Source: Daily News and Analysis – India  
December 2009*

### **SALARIES COMPARISON OF NURSES IN OECD COUNTRIES**

The remuneration level of nurses is among the key factors affecting job satisfaction and attractiveness of the profession. It has also a direct impact on cost as wages represent one of the main spending items in health system. Data published in *OECD Indicators of 2009* reveals that in many OECD countries the remuneration of nurses is above the average wage of workers in their respective countries. In Portugal the income of nurses is 70 % higher than the average wage of workers, while in Mexico it is two times higher. In UK there has been a yearly increase of 3 % over the past ten years representing two times more than the growth of average wage in the economy. However, it is lower in Hungary, Slovak Republic and Czech Republic. When comparing one country to another in a common currency (normally using the US Dollar) Luxembourg is six times higher than the three above mentioned countries. Nurses in the US continue to draw high salaries compared to their counter parts in other countries, thus the ability of this country to attract nurses from other countries.

*Source: Health at A Glance- OECD Indicators-  
2009*

### **POOR ACCOMMODATION FACILITIES FOR NURSES IN UGANDA**

The Health Workforce Advocacy Uganda (HWAU) has blamed government for the poor number of health providers, especially nurses in the rural areas due to lack of facilities for accommodation. According to Apollo Nygansi of HWAU, the allowance of 40,000 Uganda shillings (equivalent to 20 USD) per month for housing allowance is outdated, pretentious and unreasonable as it does not cover the cost of a decent accommodation. This is the reason most health workers are opting for jobs in Kampala, capital of Uganda. Patrick Bateganya, General Secretary of the Uganda Nurses and Midwives Union has stated that it is difficult to secure accommodation in rural areas. It has resulted in staff having to walk

long distances, exacerbating the feelings of discontent with their working environment and dissuading potential new recruits. He cited the case of a nurse who has to walk ten kilometres distance after leaving work at 22.00 hrs at her risk and peril and a nurse who was stabbed on her way back home in Mulago.

*Source: Published by Reporter Rukiya  
Makuma in The Independent – Uganda*

### **TEXAS NURSES ACQUITTED BY STATE JURY**

Anne Mitchell and Vicki Gale, two Registered Nurses of the state of Texas who were accused of *misuse of official information* for having reported a Medical Doctor (published in the last SEW News October 2009) were acquitted. Although the charges against Vicki Gale were dismissed as she was protected by the whistle-blower status, Anne Mitchell had to go on a four day trial. It needed less than one hour for a State Jury to acquit her. However, if she was convicted she could have faced up to ten years imprisonment. After the verdict Anne Mitchell said that she was just doing her job and invited nurses to come forward and denounce any bad care in the interest of their patients. Suzy Sportsman, President of the Texas Nurses Association said she was very pleased with the verdict and that justice has prevailed for Anne Mitchell. She added that the duty of a nurse is to advocate for the health and safety of patients without any compromise. This sentiment was echoed by Rebecca Patton, President of the American Nurses Association who however, deplored that this sort of blatant retaliation was allowed to take place and has even reached the trial stage.

*Source: Published in Health Leader Media by  
John Commins- February 2010*

### **IMPROVING NURSE RETENTION IN JORDAN**

The past few decades have witnessed a critical shortage of Registered Nurses in Jordan affecting the delivery of health care. The rate at which nurses are leaving the profession has increased from 18.4% in 1996 to reach around 40% in 2008. Although considerable efforts have been made to focus on recruitment it has proved to be futile because retention strategies did not receive the same attention. In this respect many studies have been conducted to determine the push factors that make nurses leave their job or migrate to other countries.

The study revealed that age can be a determining factor where older nurses form a more stable workforce with greater job satisfaction and are more likely to stay in their job until retirement. Conversely young nurses are more inclined to look for a variety of experiences and opportunities for advancement and are more tempted to leave for greener pastures. Other crucial factors that were identified for an effective retention plan include salaries, work environment, career development, work autonomy, workload and job satisfaction.

*Source: Advanced Practice Nursing Journal  
2009*

### **NURSES IN SURINAME WENT ON STRIKE**

Nurses in Suriname went on strike in two hospitals in March this year namely at the Academic Hospital and the Government Hospital. It follows an increase in salary that was granted to public officers such as teachers and police officers, while nurses and other health workers were left out of this deal. According to Government there is no money

for any increase in the salaries of nurses and other health care professionals who have been waiting for more than a year for a salary adjustment. In the Academic Hospital provisions were made to ensure an emergency service to safeguard lives of patients as per ICN guidelines. However in the government hospital after three days of strike, nurses have stopped ensuring a minimal service as decided by the union. The Suriname Nurses Association is trying to act as a mediator to convince nurses not to put at risk the lives of patients. The NNA has met the chair of the nurses' union and has given him a copy of the ICN Strike Policy. Presently, after negotiation it seems that government is willing to pay the increase to nurses and other health workers. In this period of economic crisis the big issue is where to find the money.

*Source: Information sent to ICN by the  
Suriname Nurses Association*

The **International Council of Nurses (ICN)** is a federation of 133 national nurses associations representing the millions of nurses worldwide. Operated by nurses and leading nursing internationally, ICN works to ensure quality nursing care for all and sound health policies globally.

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