

NURSING ADVOCACY: LEADING CHANGE THROUGH GLOBAL CONNECTIONS

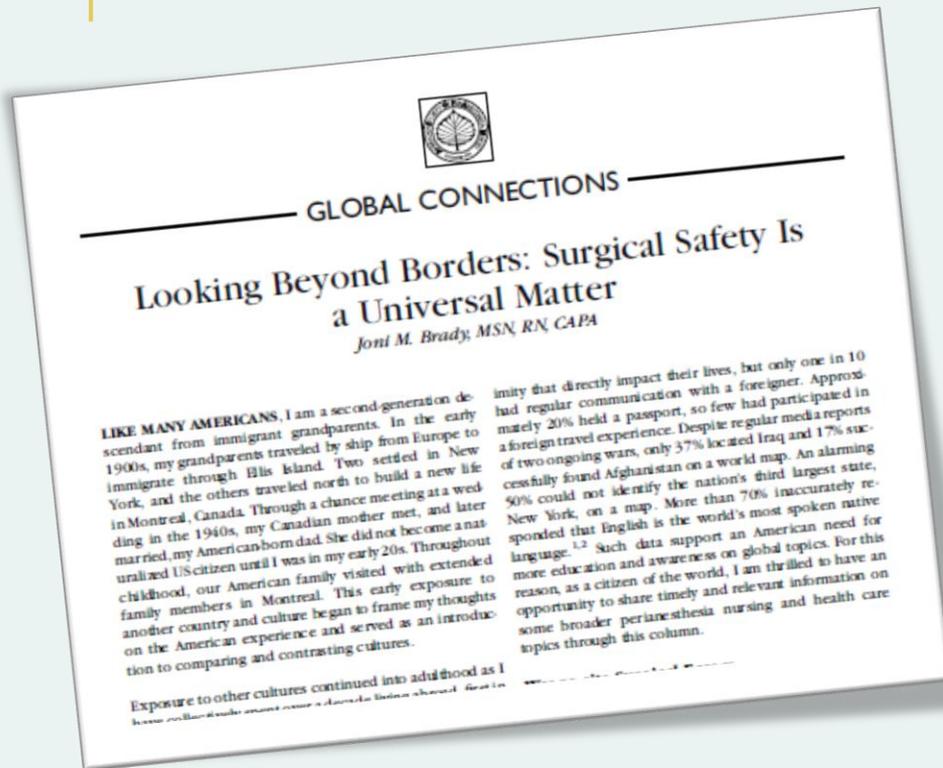
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“The more intensely we feel about an idea or a goal, the more assuredly the idea, buried deep in our subconscious, will direct us along the path to its fulfillment.”

~ Earl Nightingale





Approximately 234 million surgeries/year worldwide

- large variations in quality, safety

Wrong site surgery occurs across the globe

- WHO checklist launched

Developing nations perform surgery with insufficient equipment in substandard buildings with poorly trained personnel

- WHO handwashing campaign, Lifebox program



GLOBAL CONNECTIONS

Perianesthesia Practice and the Underserved

Joni M. Brady, MSN, RN, CAPA

"Action springs not from thought, but from a readiness for responsibility."

—Dietrich Bonhoeffer

MORE THAN 230 MILLION surgeries are performed throughout the world each year,¹ yet much remains to be discovered about perianesthesia nursing care standards and the overall delivery of perianesthesia care across continents. Consider the highly regulated and controlled health care environment in which American nurses work. Then, imagine an operating room (OR) where nurses work barefoot and eat lunch during a surgical procedure while sitting on the OR floor, or a surgical facility without a postanesthesia care unit (PACU). Experiences in foreign countries, frequently shared by colleagues who have traveled abroad on volunteer surgical mission teams offer a greater understanding into emergent global practices and illustrate the need for expanded resources and health care practice-related education in underserved populations.

staff for one hour before transfer to a nursing unit. Having previously traveled to the bustling capital city Budapest, I imagined this care occurring in a rural care delivery facility. To my surprise, this was a standard practice in modern Budapest (E Häbermann, personal communication, June 6, 2008).

For the past six years, while based in Germany, my husband has administrated humanitarian aid (HA) projects for the US Department of Defense. The area of responsibility comprises Europe and Africa, with a primary focus on the health and welfare of native populations. Over the years, in conjunction with other US government agencies and country-based teams, many projects throughout Eastern Europe and across the African continent have been planned and completed. I vividly recall the first time he returned from a site visit trip to a HA project site in the Ukraine. The photographs he shared, taken during a tour of the urban hospital in which an AIDS unit project was commissioned were alarming. In addition to filthy shared patient care unit bathrooms, the OR housed

Much remains to be discovered about worldwide perianaesthesia nursing care delivery

Many countries still without establishment of post anaesthetic care unit

- some developed countries do not yet recognize this nursing specialty

Brady, JM. Perianesthesia practice and the underserved. *Journal of PeriAnesthesia Nursing*, 24(5), 2009, 321-323.

Severe shortage of global health professionals

- increasing migration of patients and nurses

Globalization changed dynamics of the healthcare workplace

Cultural intelligence quotient needed

- cognitive
- physical
- emotional/motivational



GLOBAL CONNECTIONS

Cultural Nursing Implications in an Integrated World

Joni M. Brady, MSN, RN, CAPA, CLC

STAYING INFORMED about the impact of global events and conditions is an increasingly important step for nursing professionals who deliver care in an integrated patient population. Understanding the culture and human condition of a patient can only serve to enhance the quality of care delivery. This is especially true in a nation founded on the ethnic melting pot theory. About a decade ago, I encountered a disturbing and quite memorable case while working in an urban academic hospital same-day procedures unit. It was a typically busy day for the unit, and my assignment was to admit and recover patients having interventional pain management and endoscopy procedures. Like many units of this type, the patients were located a row of connected three-walled bays with a curtain front, so sounds and voices tended from one bay to the next.

facial expression, and was holding on to her male cousin with a very strong grip. I quickly began to explore the situation using the cousin as an English interpreter. He explained that this woman was a Bosnian refugee who had been granted political asylum in the United States as a victim of war crimes. As the longtime spouse of a career military service member, I was very aware of the nature of the conflict in the Balkans and understood that this woman had endured a horrific period in the history of her homeland. During the early 1990s, Serbia waged a war on Bosnia and Croatia involving organized and horrendous acts of violence on citizens, to include ethnic cleansing and genocide.¹ The cousin reported that this woman had been captured, raped, and beaten on numerous occasions by Serbs until finally being rescued by United Nations coalition forces. On this day, she

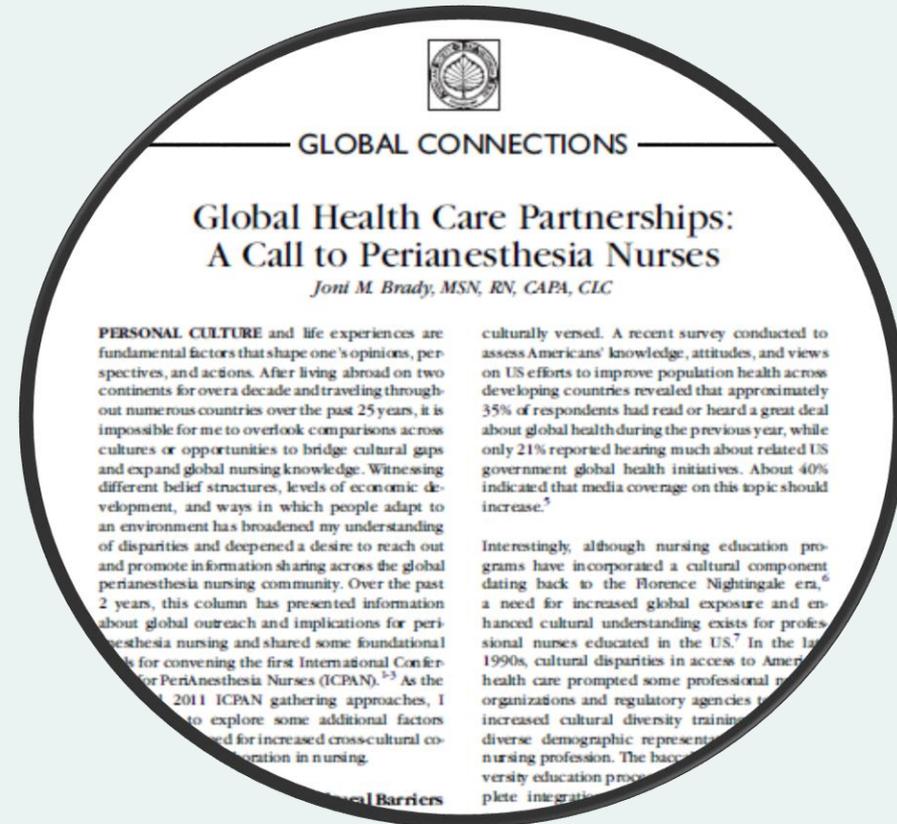
National health care budgets and research grant funding increasingly stressed

Nurses called to engage in multinational partnerships

- prudently allocate resources
- grow shared body of evidence to support best practice

Collaboration can ...

- change existing attitudes, promote understanding
- foster multicultural experiences and nurses' cultural competence
- further nurses' understanding of socioeconomic conditions and related health disparities



... ultimately advance global practices!



“So never lose an opportunity of urging a practical beginning, however small, for it is wonderful how often in such matters the mustard-seed germinates and roots itself.”

~ Florence Nightingale

Historical nursing image

- Rooted in early Christianity
- Based in emotional realm versus skill level
- Charitable / altruistic / devotional
- Voice is silent, anonymous



Gordon, Suzanne. (2008, May 5). "From Silence to Voice: Placing Nursing at Center Stage." ASPAN National Conference presentation.

Common nurse personality traits

- Intelligent
- Educated
- Caring
- Devoted
- Committed
- Trusted



Voice of nursing



The nursing profession must be both vocal and actively engaged in major health care issues.



Buresh, B. & Gordon, S. (2006). *From Silence to Voice: What Nurses Know and Must Communicate to the Public*. ILR Press: Ithaca, New York.

Barriers affecting advocacy



- Apathy - not caring
- Disempowerment
- Feelings of inadequacy; preparedness, message
- Lack of knowledge, education, tools, strategy
- Lack of time on part of advocates

Advocacy & the power of voice

- Speaking on behalf of a particular issue, idea or person
 - pleading, supporting a cause
 - ability to influence, transform, mobilize
- Process of actions to bring about change
- Collaborate with other health care professionals to promote community, national, international efforts
- Commit to continuous learning through education, skill development, evidence-based practice (EBP)

I'm **'just a Nurse.'** I just make
the **difference** between life and death.

I just have the educated eyes
that **prevent** medical errors,
injuries, and other catastrophes.

I'm just a researcher who helps
nurses and doctors give **better,**
safer, and more effective care.

I just work in a major teaching hospital
managing and **monitoring** patients
who are receiving **experimental,**
cutting edge treatment.

just a Nurse

I just **educate** patients and families
about how to maintain their **health.**

I just make the **difference** between
a person staying in their own home
and going to a nursing home.

I'm just a **professor** of nursing who
educates future generations of nurses.

I just make the **difference**
between dying in agony and dying
in **comfort** and with **dignity.**

I'm just **central** to providing
the **real bottom-line** in health care.

Don't you want to be **'just a Nurse'** too?

Suzanne Gordon, 2001®

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Poster and bookmark available at: <http://suzannegordon.com/other-pprojects/just-a-nurse-poster/>

Nurse Heal Thyself: Personal Power can Create Professional Change

Joni M. Brady

BARNA Committee International Link

ABSTRACT

The nursing profession occupies a critical role at the center of healthcare. Despite its inherent importance in the delivery of and advocacy for quality patient care, nursing is faced with both internal and external challenges. Nurses must address the internal challenges and adopt new behaviors and strategies in order to strengthen the profession's public image, become better positioned to address external threats to nursing practice, and secure a leadership position within the healthcare system.

burned out and unsupported in the workplace, and were planning to quit their job [Thomas, 2003].

In a time of serious nurse shortages, we have often heard the expression, 'Nurses eat their own.' As an experienced nurse, I sadly understand why this is said and wonder how many of us have been subject to or witnessed others perpetrating negative relationships in the workplace. The reality is that experienced nurses and the culture of nursing are contributing to the problem of attrition and negative images, and healthcare delivery and quality of care will suffer unless we in the nursing profession rise up and change some behaviors.

INTRODUCTION

NURSING PERSONALITY AND BEHAVIOR

Brady, JM. (2007). Nurse heal thyself. *British Journal of Anaesthetic and Recovery Nursing*, 8(4), 75-78.

- Embrace collegial relationships
- Learn to better articulate / explain the intellectual characteristics, specialized role and value of nursing in health care delivery to consumers (patients, families, interprofessional colleagues)
- Participate in professional nursing organization activities to support a mission to contribute to future of our chosen profession



Thank you for attending ICPAN 2015!