



Task-shifting in sub-Saharan Africa ICAP – Global Nurse Capacity Building Program

Mie Okamura

Global Nurse Capacity Building Program — Project Director ICAP at Columbia University — Mailman School of Public Health



Background – Africa

	2000	2015
New HIV infections - Adults and children	2.3 million	1.370 million (61%)
ART coverage	less than 1%	11.4 million people receiving ART in 2015 (41%)
# of people dying from HIV- related causes/year	1.5 million (2004)	800,000 (53% fewer)

(WHO, 2015)

- 75% new infections;
- Zero infection among children;
- 90% know HIV status;
- 90% initiated ART;
- 90% suppressed VL;

- Health systems improvement;
- Strengthening and expanding the health workforce.



Task shifting – WHO 2008

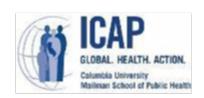
'Task-shifting approaches have helped to reduce the shortage of health workers in many countries, but ensuring quality, safety and motivation of those workers remains a challenge." WHO, 2011.

Nurses are Frontline of health services (80%)





Approach to improving HIV care and treatment – task shifting



Strengthening health systems

Development of a robust and welltrained nursing workforce



PEPFAR'S – HRSA - Global Nurse Capacity Building Program (GNCBP) – since 2009 – 10 countries and 22 schools



- MoH
- Academic institutions

Nursing Education
Parnership Initiative
(NEPI) – improve de
quantity and quality of
the nursing and midwife
workforce



(GN) – increase nursing and midwifery capacity to provide HIV and primary care services

- MoH
- Nursing council
- Nursing associations
- Training institutions





Approach to improving HIV care and treatment – task shifting

GN Program (Cameroon, DRC, Ethiopia, Kenya, Mozambique, and Cote d'Ivoire):

Nurse-Initiated and Managed Antiretroviral Treatment (NIMART): Kenya - needs assessment and mentorship;

Campus to clinic training: South Africa;

Nurse-led ART initiation (NARTI) training: Swaziland;

HIV pre-service nursing curriculum: Swaziland;

Option B+ training: Cameroon.

NEPI - DRC, Ethiopia, Lesotho, Malawi, South Africa, and Zambia:

NIMART: Malawi, Lesotho and Zambia (Option B+ e-learning).

Clinical preceptorship program: Malawi (NIMART competencies).





Impact of nursing workforce in HIV care and treatment

Country name	Number of sites where there is NIMART (either pediatric and/or adult)	Number of patients enrolled in HIV care*
Cote d'Ivoire	16	11477
DRC	216	26858
Ethiopia	59	21757
Kenya	293	256821
Mozambique	77	170774
TOTAL	661	487687

^{*}includes adults and pediatric patients





Success

"Since being trained, I have trained and mentored five nurses who have initiated 30 patients on ART" A.L. a nurse from Katalo Manyatta Health Centre, an ICAP-supported facility in Nyanza region - Kenya.

"We do not have to wait for a clinical officer to start prescribing ART for HIV-infected women at our PMTCT clinic" R.M. a nurse at Athi River Health Centre, an ICAP-supported facility in Eastern region - Kenya.

"We have benn able to empower the nurse, now they have a voice, they feel more confident as they are providing care and treatment for clients. Nurses were able to reduce the waiting time, improving the adherence and retention" D.N.O. responsible for the nursing program at ICAP- Kenya office.





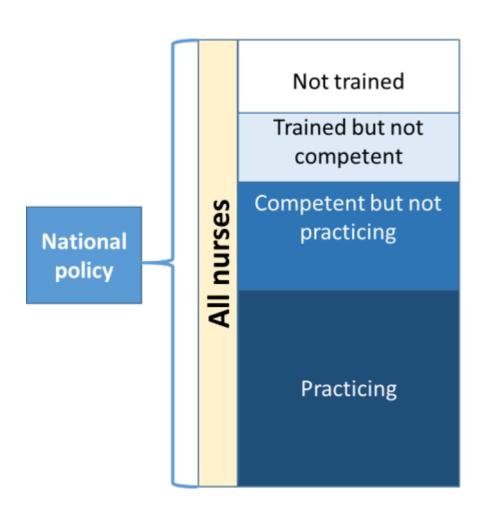
Challenges

- Pre-service education is not regularly updated with the latest care and treatment guidelines;
- In-service trainings repeat frequently (high rotation of nurses);
- Limited support from most experienced clinicians;
- Clinical officers/physicians see ART management as their domain;
- Motivation lack of incentives





Challenges



Identify barriers and opportunities to bridge the gaps.

Smith et al. Identifying the Gaps: An Assessment of Nurses' Training, Competency, and Practice in HIV Care and Treatment in Kenya. JOURNAL OF THE ASSOCIATION OF NURSES IN AIDS CARE, Vol. 27, No. 3, May/June 2016, 322-330



NIMART can change broader health outcomes

 Expanded scope of practice for nurses enhances ability to leverage broader health outcomes developed through HIV responses.

•NIMART increases access to HIV care and treatment to reach 90 – 90 – 90 goals



Contact

Mie Okamura

mo2350@cumc.columbia.edu

Nursing Capacity Building

