Understanding the Lived Experience of Nurses Practicing in Haiti

Judith James-Borga PhD., RN
Lorraine Emeghebo EdD., RN
61.7% of population below the poverty line (UNICEF, 2013)

Highest morbidity and mortality rate in the region

Shortage of all levels of healthcare personnel (Garfield & Berryman, 2011)

Most of health care delivered by Registered Nurses

Overwhelming majority of RNs are diploma educated
Phenomena of interest

The meaning of the lived experience of diploma educated registered nurses working in Haiti
Justification

- January 2014 – Haiti institutes baccalaureate degree as entrance into nursing
  - World Health Organization (WHO)
  - International Council of Nurses (ICN)
- Majority of RNs are diploma educated
- Gap in Literature
- Impact for the current practicing nurses
- In many countries across the globe the majority of their nurses have diploma as their highest level of nursing education
Relevance of the Study for Nursing

- Provide illumination and understanding and give meaning to the experiences of practicing nurses in Haiti prior to the implementation of the new four-year BSN program.
- Add to the knowledge base of nursing science.
- Provide insights that may inform and guide nursing curriculum development.
Method of Inquiry

- Qualitative
- Phenomenological approach
  - Person centered
- Merleau-Ponty (1945/1962) phenomenological philosophy
  - What is the nature of the phenomenon
    - the experience of a nurse practicing in Haiti
- Van Manen,(2011) methodological structures of Human Science Research
  - Research process that guided the study
Sample

- Purposive sample
- Thirteen 13 practicing nurses
- Three to seventeen years nursing experience
- Graduates of government-sponsored nursing school
- Graduates of the government-approved private nursing schools
- State Licensed in Haiti
Data collection procedures

- Semi-structured interviews
- Open-ended question
  - Tell me about your experience as a nurse in Haiti
- Researchers’ field notes
- Digital audio recordings
- Translator
Analysis and interpretation

- Epoche
- Personal Bracketing of the researchers’ biases
### Analysis

**Major Categories - Nurses’ role**

<table>
<thead>
<tr>
<th>Significant statements</th>
<th>Units of Meanings/subcategories</th>
<th>Categories</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nursing is a calling</td>
<td>A unique role</td>
<td>Role &amp; responsibilities</td>
</tr>
<tr>
<td>There are no physicians. Nurses work as nurse consultants.</td>
<td>Role of the nurse</td>
<td></td>
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<tr>
<td>When the patients come to the clinic they scope them, we do a general assessment, we assess them and we send them to do some lab test and then we prescribe them medications I perform episiotomy...deliver babies...induce labor We provide first aid then transfer the patient to the hospital. If the patient comes with cardiac problems we try to help them first and then we send them to the hospital</td>
<td>Primary care providers</td>
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<td>Front line care</td>
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## Findings
### Major Categories- Value of Nursing

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<td>They do not value nurses in Haiti. We are a kind of underrated profession</td>
<td>Undervalued</td>
<td>Not valued</td>
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<tr>
<td>I delivered the baby and baby was breathing a little bit, and was not crying. ...</td>
<td>Internal reward</td>
<td>Value</td>
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<tr>
<td>so I took a little gauze and put it over the baby’s mouth and I was trying to do mouth</td>
<td></td>
<td></td>
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<tr>
<td>to mouth breathing and I did it a couple of times and the baby cried.</td>
<td></td>
<td></td>
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<tr>
<td>Sometimes a lot of nurses finish school and they cannot find a job. They really do not</td>
<td>Unemployment</td>
<td></td>
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<tr>
<td>value nurses and they sometimes work so hard, they are devoting their lives to the</td>
<td></td>
<td></td>
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<tr>
<td>patient and don’t get rewarded. ... sometimes they barely get paid sometimes it can be</td>
<td>Financial insecurity</td>
<td></td>
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<tr>
<td>frustrating for nurses ... These nurses they have families and they are putting their</td>
<td></td>
<td></td>
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<tr>
<td>family time on hold. How are they going to support their families?</td>
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### Analysis

**Major Categories - Challenges of Nursing**

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<td>More than 20 patients to 1 nurse, one ancillary. There may be some nursing students.</td>
<td>Nurse-patient ratio</td>
<td>Challenges to providing patient care</td>
</tr>
<tr>
<td>Because of the challenge of having to care for so many patients “we don’t get the chance to take care of every one. Sometimes we try to select the cases that are more critical.</td>
<td>Rationing patient care</td>
<td></td>
</tr>
<tr>
<td>Patient population: Appendicitis, wound drainage; amputations from diabetic foot or gangrene;</td>
<td>Patient acuity</td>
<td></td>
</tr>
<tr>
<td>I’m hoping for ... technology that the patient can be hooked up to the machine ... to monitor their oxygen levels as well as also an EKG... this machine to control their respiration, their oxygen saturation. Need technology on site. A portable x-ray so patients don’t have to walk all the way to the radiology department. Sometimes they are unable to walk We have no equipment and materials</td>
<td>Lack of resources materials, equipment and technology</td>
<td></td>
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## Findings

### Major Categories - Collaboration

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<td>We get along with the doctors. If they ask us to do something we do it. We assist them with delivery and in the operating room. Nurses and physicians know their roles. You come to the hospital as a nurse you know what you have to do. You come to the hospital as a doctor you know what you have to do. However they work together I think [RN/MD] relationship is very good. We work together.</td>
<td>Collaborative</td>
<td>Collaborative engagement</td>
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<td>There are too many private schools...the State must make sure that they [the schools] are following the guidelines and that proper teaching is given [The State] must make sure that the students are going to the hospitals and practicing like regular state schools A lot of nurses are educated from different schools, some are more competent than others. So many nursing schools opening, they [instructor/professors] do not have that much knowledge</td>
<td>Multiple nursing schools Need for regulations Inconsistent nursing education standards Need for increase education level of the instructors</td>
<td>Inconsistent education of practicing nurses and nurse educators</td>
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Essential themes

- Nursing as the front line of health care
- Nursing as value/not valued
- Nursing as challenging
- Nursing as a collaborative relationship
- Nursing as educated/undereducated
Conclusion

- Intrinsic rewards
- Task oriented
- Frustration
- Competency
- Working conditions
- Patient outcomes
- Medical missions
Recommendation

- Standardization of education curriculum
- Oversight and regulation
  - Institution of license renewal period
- Ongoing education enhancement
  - RN to BSN
  - Nurse educator
  - Nurse practitioner
- Incentives to encourage RNs to remain in Haiti
  - Financial
  - Resources
- Coordination “mission” activities
Major limitations

- Small sample size
- Generalized to participants in this study
- Participant pool
  - Nurses from unrecognized schools were not included in the study
  - Most of the participants were nurse-educators
- Language
  - It is possible that some of the rich data might have been lost in the translation process.
Further research

- Impact of current nursing on patient outcomes
- Base-line patient and nurse satisfaction data prior to the impact of the new 4-year curriculum
- Longitudinal study to determine the impact of 4-year program on nursing practice and patient outcomes
- Replicate study with diploma educated nurses in other countries
References