



# Building regional sustainable nursing and midwifery clinical research networks to improve health outcomes: Models in Sub Saharan Africa and the Eastern Mediterranean Region

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## Background and Purpose



Figure 1. Meeting with midwifery team in Kenya, 2015

- As nurses and midwives expand their roles and responsibilities globally, evidence-based practice is essential.
- Nurses and midwives have made educational and clinical advances, but their role in research is limited.
- Hence, this project aimed to identify gaps in nursing and midwifery clinical research outcomes regionally.

## Methods

- Collaborators from year one included Columbia Global Centers | Nairobi, the Forum of University Nursing Deans of South Africa (FUNDISA), the University of Malawi/Kamuzu College of Nursing, the University of Nairobi School of Nursing Sciences and Columbia University School of Nursing (CUSON).
- Year two collaborators include Columbia Global Centers | Amman, University of Jordan, Jordan University of Science and Technology, American University of Beirut, Badr University in Cairo, King Abdulaziz University in Saudi Arabia, and CUSON.
- Products for each year include:
  - An environmental scan (scoping reviews of indexed and grey literature searches)
  - A Delphi survey to establish clinical nursing and midwifery research priorities
  - Social Network analyses of participants
  - A Summit meeting of over 30 regional experts to achieve consensus on a regional research agenda and a mentorship plan to connect academicians with clinicians to expand and deepen clinical research outcomes.

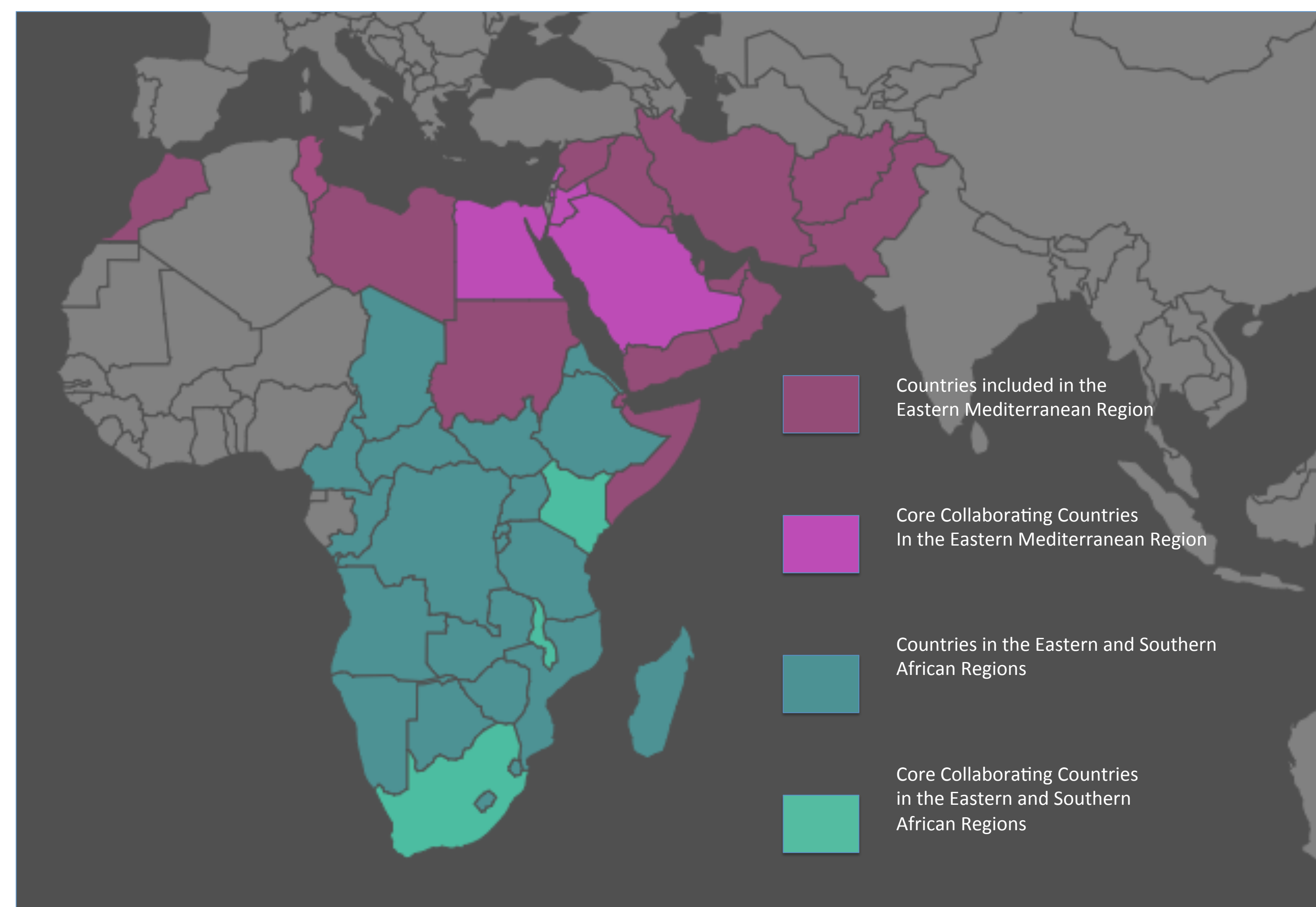


Figure 2. Collaborating Countries

## Results

Table 1: Results of the environmental scan in Southern and Eastern African countries.

Subjects	Grey literature n (%), N = 374	Scoping review n (%), N= 160	P-value*
<b>Assault/Abuse/Violence/ Substance Abuse/High Risk Behaviors</b>	42 (11.2)	6 (3.8)	0.01*
<b>Chronic Disease</b>	15 (4.0)	1 (0.6)	0.04*
<b>Patient Satisfaction/Experience</b>	33 (8.8)	36 (22.5)	<0.001*
<b>Pediatrics</b>	34 (9.1)	4 (2.5)	0.01*
<b>Other Topics</b>	0	23 (14.4)	<0.001*
<b>Acute Care</b>	7 (1.9)	5 (3.1)	0.37
<b>Cancer</b>	7 (1.9)	5 (3.1)	0.37
<b>Disease Prevention/Health Promotion/ Diet/Exercise</b>	37 (9.9)	12 (7.5)	0.38
<b>Infectious Disease</b>	80 (21.4)	24 (15.0)	0.88
<b>Mental Health</b>	12 (3.2)	4 (2.5)	0.66
<b>Midwifery/Maternal Health and Mortality/ Women's Health</b>	101 (27.0)	36 (22.5)	0.28
<b>Palliative Care</b>	6 (1.6)	4 (2.5)	0.48

\* Indicates statistical significance. Indexes used were Embase, CINAHL, and PubMed. Grey literature was found through books, interviews with local experts, and of sites unindexed in the major search engines listed above such as meeting abstracts and university repositories and internet searches.

## Conclusion

- The development of sustained networks of nurse and midwifery researchers is a central component to strengthening the impact of nurses and midwives at frontline clinical arenas with evidence-based practice.
- A similar model can be adapted and replicated in other regions.
- Strengthening and expanding research under the leadership of nurses and midwives will improve clinical care and communities' health.

## References

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Figure 3. Meeting with a healthcare team in a refugee camp in Jordan, 2015

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