

CONFERENCE REPORT

5TH INTERNATIONAL CONFERENCE OF GLOBAL NETWORK OF PUBLIC HEALTH NURSING

COMPILED BY MARGARETTA GLORIA CHANDI (DR)
SPONSORED BY ICGGN THROUGH THE MCCLYMONT FUND

14TH – 16TH MAY 2019



Executive summary

The Global Network of Public Health Nursing organized their 5th International conference at Nairobi from 14th – 16th May, 2019. The theme of the conference was "Public Health Nurses achieving SDG 3, Good health and well-being". Participants from across the globe attended the conference. The ICCNR sponsored two African Public Health Nurses for this conference through the Mary McClymont Fund.

Highlights of the 3 day conference included speeches, presentations and plenary sessions on Universal Health Coverage, Primary Health Care and some service delivery strategies. The nurse was targeted as the agency for leading the UHC. Poster and oral presentations were centred on achieving SDG 3.

Her Excellency the First Lady of Kenya, Mrs. Margaret Kenyatta delivered the welcome address whilst Dr Githinji Gitahi, Amref Health Africa gave the keynote address. Highlights of the welcome address were on the good work from nurses and the fact that good health and well-being is an issue the country is grappling with. The theme resonates with Her Excellency the First Lady's beyond Zero initiative that seeks optimal healthcare for mothers and babies. Promises were made to accelerate the SDG 3 in Kenya.

Dr Gitahi gave a historical perspective of Public Health and zoomed down on poor health financing arrangements for the African continent. It was obvious from his presentation that public health care services have been and continue to be beneficial in curbing disease outbreaks. He emphasized the need to strengthen community engagement to ensure holistic health care delivery. He also emphasized on the fact that Public Health Nursing has an important role to play in accelerating UHC to achieve SDG 3.

The sessions were intertwined with plenary sessions to enhance understanding of the presentations. Break away sessions were also held concurrently according to the disciplines such as Maternal and Child Health, Nutrition and Reproductive Health.

Other speakers were Prof. Peter M. F. Mbithi, Vice Chancellor, University of Nairobi, Prof. Miriam C. A. Wagoro, Dr. Lucy Kivuti- Bitok and Linda Smith, Chair for GNPHN amongst others.

The conference afforded the opportunity to showcase different research efforts made by Public Health Nurses in achieving SDG 3. Students from the University of Nairobi were also given the opportunity to showcase their contribution to achieving SDG 3 through their research. Clues to future research participants could embark upon and processes of going about some difficult research topics were made easy through interactions with participants. On the whole, the conference afforded the opportunity to learn new ways through the showcasing of innovations.

The networking opportunity created at the conference was beneficial. Enquiries are just phone calls or emails away post conference. The excitement of getting WhatsApp messages from friends made at the conference cannot be equalled by anything.

To conclude, the 3 day workshop by the Global Network of Public Health Nurses has been a learning platform that will forever be cherished. Interacting with stalwarts in Public Health has motivated me to achieve higher laurels in Public Health.

My sincere appreciation goes to the ICCHNR Mary McClymont fund for this positive exposure. This being the first International Conference I have attended will forever be the reference point in my life. I am forever grateful.

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Proceedings of the 5th International Conference of Global Public Health Nursing

The 5th Global Public Health Nurses Conference was held at the Safari Park Hotel at Kenya, Nairobi from 14th to 16th May 2019. It was attended by members of the group and students from the School of Nursing, University of Nairobi, Kenya.

Aims

The aims of the conference were to:

- provide delegates with an opportunity to present and learn about new evidence-based knowledge concerning health systems/services/practice to enable public health nursing to contribute to the achievement of the targets of **Goal 3 of the UN Sustainable Goals**.
- allow delegates time to discuss and formulate plans to implement possible changes in their countries/local health systems.
- enable networking opportunities for delegates with international colleagues.
- To participate and represent public health nursing on international health policy groups and forums.
- promote the Global Network of Public Health Nursing.

Theme

The theme for the conference was:

“Public Health Nurses achieving Goal 3 of the UN Sustainable Development Goals ‘Good Health & Well Being’”

Attendance

The conference was well attended by participants from Ghana, Kenya, Nigeria, Malawi, Zambia, Uganda and other African countries. Participants from Japan, Norway, Netherlands Denmark, the United States of America, Britain and other countries also participated in this conference.

Method

The conference employed the following methods:

1. Oral presentations from participants
2. Poster presentations
3. Exhibitions from sponsors and health Partners
4. Plenary sessions
5. Breakout / concurrent workshop sessions

6. Poster presentations

Activities

Activities that preceded the opening ceremony included site visits to some of the health facilities in Kenya and a Public lecture at the University of Nairobi by Prof. Miriam K Were on strengthening Primary Health Care to achieve Universal Health Coverage. The import of this lecture was to suggest ways of achieving responsiveness from clients as well as increasing access and coverage in health care. A few innovations in service delivery such

The scientific sessions were mainly presentation of research by some participants. Notable among the presentations were home visiting services to migrants, assessing the home visiting strategy for maternal and newborn care, and a home visiting model for children 0-5 years. Other areas covered included nutrition, adolescent health, primary health care services and others.

There were plenary sessions following about 3 batches of presentations. Participants were given the opportunity to ask the presenters pertinent information their researches. Questions and answers were relevant to the presentations and they created avenues for other participants to understand and appreciate the findings in the research.

The breakout concurrent sessions made room for other related topics to be presented in other syndicate rooms. Participants had to choose based on their interest in the topics. It was really fun running from one presentation to the other to catch the salient points in specific researches of interest to some of the participants.

Another interesting activity was the dinner/gala night. Participants dressed up in formal attire and were treated to a variety of grilled meat. Meat available included crocodile, ostrich, rabbit, beef, goat, mutton, pork, chicken, turkey, camel and many others. There was a live band in attendance. Participants danced their hearts out.

Another remarkable activity was the presentation of certificate to the Mary McClymont scholars who were supported by International Collaboration of Community Health Nursing Research (ICCHNR).

Day by day proceedings

Participants had three days of scientific sessions.

Day 1: 14th May, 2019 – Scientific sessions and Opening ceremony

The day began with a quick GNPHN meeting at one of the syndicate rooms. This was followed by a plenary session. The highlights of the session were introduction of key participants and a roll call of countries present. The objectives of the conference were reiterated as well as the methods for rolling out the conference.

Dr. Githinji Gitahi took his turn to deliver the Keynote Address. He took participants through historical perspectives of the role of public health in curbing epidemics, to the inadequate health financing policies in Low- and Middle-Income Countries. He also bemoaned that health

systems run services and programs that are not responsive to clients. Transportation and other hidden costs are not factored in for patients/client's satisfaction. He lauded Universal Health Coverage (UHC) as the way to go to achieve SDG 3.

A panel discussion on UHC hosted by representatives dr. Micah Matiangi (Amref Health Africa), IntraHealth, Prof. David Weakliam (Global Health Net workforce), MOH –Kenya and Jhpiego. The moderator was Peter Waithaka from USAID. From the discussion, it is time health care services are planned to factor the needs of clients. Equity and access are important in achieving UHC and nursing is important in achieving UHC.

Another event of importance was the opening ceremony. There were numerous guests in attendance. Her Excellency, the First Lady of Kenya, Mrs. Margaret Kenyatta delivered the welcome address and pasted Kenya on the gathering quilt (a tradition within GNPHN where a piece of cloth from the hosting country is pinned on a special quilt for remembrance). The student nurses performed a spectacular hand-wash dance. They took performed the steps of hand washing in dance moves.

The session after the opening ceremony was chaired by Dr. Wasunna Owino and Ros Bryar from IntraHealth and GNPHN respectively. Rapporteurs were Dr. Lucy Kivoti Bitok and Fredrick Omiah from the University of Nairobi and ECSACON respectively. Dr Barbara Stilwell made a presentation on the Nursing Now Campaign. The import of her presentation was to encourage nurses to fit themselves into the quality nursing care agenda and lead the way to UHC.

Concurrent sessions and workshops were organized during the second plenary at 3 rooms. Jambo 1 had Micheal Nyongese and Christina Lindhart as chairpersons for the session. Rapporteurs were Gladys Mberia and Boniface Maina. The Oral presentations were on Maternal, Newborn and Child Health: Practices.

The first presentation by Boniface Oyugi was on quality of care and outcomes of the Kenyan free maternal Policy. The study is expected to provide evidence on quality of care to achieving UHC. The next presentation was on “New families”, a programme extending the Norwegian Health Care Service in Oslo. This was presented by Maria J. Leirbark. The presentation featured a home visiting model where pregnant women (28 weeks gestation) are visited till their children attain 2 years. It is a salutogenic and universal programme for first child with the aim of focusing on family needs and building a stronger relationship nurse-client relationship.

Dr. Margaretta Gloria Chandi, a McClymont Scholar from Ghana, gave a Presentation on “Assessment of the Implementation of the Home Visiting Strategy: The Case of Maternal and Newborn Care in the Ga South Municipality of Ghana”. The highlights of this presentation featured home visiting services implementation in a Primary Health Care system (Community-based Health Planning and Services) in Ghana. Findings indicate that 51% of respondents had had visitations whilst the service Providers (Community Health Officers) had challenges such as workload that interferes with home visiting services. Home visiting was beneficial to mothers and neonates.

Ruth Wagathu presented the final paper for the day on effect of giving birth to a child with congenital anomalies on mothers in newborn unit at the Kenyatta National Hospital. She

outlined some of the anomalies and the stress mothers go through. Four thematic areas used were Knowledge, Reaction, Support from social environment and Support from health care system.

The concurrent session at Bougainville featured SRHR and GBV: Research, Policy & Practice. The chairpersons were Moses Wanami and Kari Glavin with Stella Githaiga and Esther Nyobengo rapporteurs. Ida Udal gave the first presentation on “But he never says he loves me” – nudes, love and abuse on snap chat”. The findings suggested that females were more prone to looking for love whilst the males were just having fun. This was followed by Sexual attitudes, sexual behaviours and use of HIV prevention services among male undergraduate students in Hunan Province, China: A Cross- section survey by Honghong Wang. Findings from this research included suboptimal use of condom, engagement in homosexual behaviours and paid sexual services among sexually active male students. Jeremiah Mianah took his turn on a survey entitled Efficacy of the integrated model of adolescents’ youth friendly services provision in Ruarka Sub Country, Nairobi County. His study found the integrated model as an effective vehicle in providing Youth Friendly Services. Xiannhong Li brought the curtain down on presentations on her paper on effectiveness of self-testing on improving HIV testing frequency for Chinese men who have sexual partners: A multicentre randomised controlled trial. He concluded that HIV self-test could promote HIV testing frequency especially in non-recent testers.

There was a workshop on at Jambo 2 with Rashid Salim as the rapporteur. The first workshop led by Dawn Eccleston was on Human traffickers use a variety of control mechanism: Do Public Health Nurses recognise these and know what to do? Dawn concluded that training is needed about how to identify victims and what to do once a victim has been recognized. He further stated that victims of human trafficking suffer from all the issues identified in the SDGs so PH practitioners must have the necessary knowledge and confidence to be able to deal with the health problems that arise. The final one for the day was on Clinical health Science research practice for Africa was by Elize Pietersen. She bemoaned that it is long overdue for LMICs to have a prominent public health science research nurse to coordinate research quality.

There were side meetings for Amref Health Africa for invited guest only whilst Dr Barbara Stilwell met the Young Nurses.

There was also a meeting to form the Africa Chapter of the GNPHN. Listed below were those elected for executive positions in the Africa Chapter of the GNPHN.

1. Chairperson; Mrs Teresa Obawayo from Kenya
2. Deputy: Christine Alura from Uganda
3. Secretary: Margaretta Gloria Chandi from Ghana (sponsored by McClymont)
4. Vice Secretary: George Nyadimo from Kenya

5. Treasurer: Wanga Zulu from Zambia
6. Organizing Secretary: Lucy Bitock from Kenya
7. Student Representative: Paul Karanje
8. Member: Florence Rwabahime from Kenya
9. Member: Elizabeth Oywere from Kenya
10. Member: Micheal Nyougesa from Kenya

The group proposed 4 pillars the focus of the group. These were:

1. Policy
2. Nursing
3. Improving practice
4. Research and education

The group will be guided by the Global network constitution and dovetail the guiding principles from the constitution.

Day 2: Scientific sessions and workshops

Day 2 was a continuation of the scientific sessions. The GNPHN chair met members of the group briefly in the morning. The conference started with a plenary chaired by Susan Otieno and Elize Pietersen from ECSACON and GNPHN respectively. The rapporteurs to the day were Jane Rebury and Stanley Murrumba. The rapporteurs of the previous day gave a summary on previous day's proceedings followed by administrative announcements. Dr. Ernest Namath (Director, Pisa Africa Alliance) took participants through SHRH policy and advocacy. The next session on empowerment of the Public Health Nurse was delivered by Dr. Dan Karee, the endowed Chair – TICH. Annette Kennedy, the president of ICN challenged participants on ICN's perspective on Public Health Nursing. There is the need for PHNs to make their impact felt in the healthcare system. There is the need for effective collaboration for quality health care. Nurses are the majority of the health workforce; nurses must lead the way in Universal Health Coverage.

The concurrent sessions had Margaretta Gloria Chandi in the chair with Caroline Adware rapporteur for Community Health Practice: research. Eli Kwame presented on Norwegian Public Health Nurses experiences of encountering undocumented migrant mothers in Child Health Centres. The aim of the research was to find out if New Families intervention will be a better approach for fathers as compared to the traditional Child Health Services. It aimed at paternal mental health and self-efficacy of fathers. Blandina Kiguru took participants through perception of bicycling to work: a case study of nurses working at a national referral hospital in Kenya. This was followed by an evaluation of a new approach to safeguarding children

supervision in health visiting practice. The study revealed that although 60% of nurses of nurses know how to ride a bicycle, 90% were not cycling to work, due to perceived danger on the roads and lack of parking space for bicycles amongst other findings.

The session which had a back to back delivery was quite a lengthy one. Anne Oevelie presented on the impact of inflammation bowel disease on the partner's daily life. The four themes that emerged from the study were: uncertainty and helplessness, loss, attitudes and strategies to cope with concerns and the need for tailored information, support and follow up. There were no gender differences in partner experiences. Harriet fields' presentation on Grassroots empowerment of women as gatekeepers of the health of the community was the next. It aimed at assessing the needs of the community as identified by women health workers. Rashid Salim and Jane (both students from the university of Nairobi) presented on Improving health by leveraging community participation; cultural experiences in Kajiako County. Miriam Wagaro was the next to present on Development of a graphic blood glucose monitoring chart for glycaemic control in Diabetes Mellitus, a modified Delphi method study. The team redesigned the "diabetic Chart" into a graphical form. This was to aid in prompt risk identification. The traditional red, yellow and green colours were left intact, but the charting was changed to the type of chart used for recording temperature. Victoria Gilroy closed the session on presentations with "Healthy weight and healthy nutrition (HWHN) champions in health visiting leading the development of consistent advice to families in UK". Questions followed after the presentation for clarification.

Bougainville had Prof. Wesley Too and Dr Mary Nandili as chairpersons for the session on Human resources for health and health care financing. Stella Nyamesi was selected as rapporteur. Presenters were Kristina Carlen – Nurse students develop the intervention wheel into Swedish context; Karen Whittaker – the EaCH study: An evaluation of the ChatHealth school nurse text messaging service; Val Thurtle – exploring career progression and retention for newly qualified health visitors following policy implementation in England; Esther Nyabendo – Knowledge, attitude and challenges of health care financing among women involved in table banking in Kangerim informal settlement, Nairobi County; Kiyomi Asahara – Development feasibility of a radiological education programme for Public Health Nurses working for local governments & Lucy Wanjiku Kivuti-Bitok – Dancing towards a healthy human resource for health; the role of Mzuqa in self - care among health care workers.

The session on nutrition and Child Health at Jambo 2 was chaired by Emily Waithaka and Christine Alura with Judith Kudoyi as the rapporteur. The presenters were Christine Louise Lindhart – communication as an important key to successful breastfeeding; Vibke Dyrseth – Use of smokeless tobacco products in pregnancy and during breastfeeding – a threat to child health; Mary Kamau – Compliance with Iron and Folic Acids Supplementation (IFAS) and associated factors among women in Kiambu County, Kenya; Dyrseth Vibeke – the prevalence of specific diet and use of supplements in breastfeeding women; Martin Omedo – Universal

scale up of kangaroo mother care in Western Kenya; Lessons from the scale-up process & Okubatsion Teketse Okube – dietary patterns in relation to Metabolic syndrome among adults attending St Mary’s Mission Hospital, Nairobi, Kenya.

The sessions continued after lunch break with Prof Anna Karani in the chair at Jambo 1. Rapporteurs were John Mbungua and Shadrack Kilimo. Topic was Community Health Practice (CHP): Practice & Policy, Education & Research. Chris Gordon, Dierdre Webb, Georgina Ritchie, Asumpta Ude Linus Ndonga, Melanie Brekke and David Musyoki presented on topics ranging from Home visiting in Bulgaria, leg logistics support, hypertension experiences in migrant Africans through to the value of integration of palliative care.

Bougainville had Dr Milo and the HRM/D from MoH Kenya with Roselyn Odundo and Grace Ojirit as rapporteurs for the session on Human Resource for Health /Health Care Financing: Policy and Practice. There were presentations from Min Yang, Victoria Gilroy, Kristin Waldum-Grevbo, Boniface Maina, Cheryll Adams, Martin Omedo and Robert Nguni. The topics presented bordered on quality of life, a multi – agency approach to perinatal and infant health, innovation in the detection of violence, destructive leadership to palliative care.

Jambo 2 featured Mental Health and Communicable Diseases Research. Esther Marfunda and Alfred Obengo steered the affairs with Francis Kabugua writing reports. There were eight presentations with some of the topics bothering on improved defaulter tracing, effect of teachers support on depression in adolescents, inter-cultural challenges in dementia care, HIV AIDS, Tuberculosis and climate change. The presenters were Felix Chitoma, Akiko Mizuta, Kristina Carlen, Hilde Qieren, Liv Halvorsrud, Angeline Chepchirchir, Elize Pietersen and Jacinta Mukulu Waila.

In the late afternoon, there were 2 partner side meetings. One each at Jambo 1 and Bougainville whilst a workshop on gender based violence was carried out at Jambo 2 with KNPA reporting. The Africa Chapter executives had a short meeting on the way forward.

Day 3: Scientific sessions and Dinner Gala Night

There was a plenary session with Pheelo Marole and Cheryll Adams chairing. Samuel Mwaura and Jane Osewe were the rapporteurs. Professor Davis Weakliam from Global Health Workforce Network took participants through fulfilling the WHO global strategy: where does Public Health Nursing fit? Public Health Nurses were seen as the front-line personnel liaising between the community and the health system. Their role in ensuring access to health care is critical. Prof Miriam was the next to present. She did justice to her topic by sequentially cataloguing the development of the Public Health Profession in Kenya. Dr. Lucy Kivuti Bitok followed with a systems dynamic modeling approach; the role of the PHN in UHC.

Later in the afternoon, 2 concurrent sessions were held at Jambo 1 and Bougainville. The session at Jambo was chaired by Keoageste Kgwabi and Kristina Carlen from ESCACON and GNPHN respectively. Rapporteurs were Lillian Nyaga and Mary Kamau. The theme was

Implementation of UHC practice. There was a panel discussion on sharing best practices in the second session with Makueni, Machakos, Kisumu Nyeri, Isiolo and Samburu as the panelists. It was moderated by Edna Tallam from UNFPA.

Bougainville had Jared Ongaga and Festus Mwema rapporteur for Bougainville. There were workshops and by Dawn Eccleston on Critical days: An opportunity to promote lifelong health. Rev. Fr. Richard Bauer took participants through “An introduction to assess spirituality and spiritual concerns in patients by PHNs.

Miriam Wangoro and Linda Smith chaired the session on draft resolutions and recommendations whilst rapporteurs were Fredrick Omiah and Mary Kamau. This was followed by the closing session.

Dinner Gala

The Dinner Gala crowned the conference activities. It was well planned and participants had lots of fun from dancing in long line round the tables to men and women dances. There was a spectacular cultural dance. The best poster Presentation and runner up were awarded. The ICCHNR sponsored participants were presented with certificates.

Poster Exhibitions

There were 34 poster exhibitions by various authors as follows:

SNO.	TITLE	AUTHOR
1.	Educational Needs Assessment, Togo, West Africa	Dr. Rosamund Bryar
2.	Jiggers control and management	Mr. Leonard Otieno
3.	Health and well-being across boundaries - experiences from Ireland, Norway and Zambia	Mrs. Anne Gerd Karisen
4.	Creating transparency in emergency health systems: safe Care’s International standards for benchmarking quality and risk of healthcare provision	Faith Muigai

SNO	TITLE	AUTHOR
5.	Strengthening Public Health Care Systems: The role	Miss Wangari Ndumia

	of Block Chain Technology in Public Health Nursing	
6.	Breast feeding - changing the conversation	Mrs Elizabeth Stacey
7.	Start at birth: Early Childhood Programmes to promote good family mental health and well-being across the life course.	Mr. Linos Muvhu
8.	Development of the Somali Health Advisory Committees to address the needs and concerns of Somalis Living in Midwestern United States.	Dr. Nasra Giama
9.	Health Promotion for Children age group 0 -6 years - a Danish Model	Christina Louise Lindhardt
10.	Public Health Nurses make active use of International Child Development Programme (ICDP) in their work to improve the interaction between parents and children	Berit Margrethe Sandvik
11.	How does an adolescent experience reporting bullying in school health service?	Mrs. Lisbeth Valla
12.	Cases of intervention refusal encountered by Public Health Characteristics of their support - In the case of elderly persons.	Reiko Okamoto
13.	Cases of intervention refusal encountered by Public Health Nurses in Japan and characteristics of their support - in the case of mothers and their children	Misaki Kiya
14.	Cultural Diversity in Perinatal Care: Somali new mothers' experience with Health Care in Norway	Prof. Kari Glavin
15.	"New families": Innovation and Development of the Child Health Services in Oslo.	Kari Glavin
16.	Systematization of Public Health Nursing Science and its significance in Japan	Prof. Mikako Arakida
17.	Intention to get ready for work determines lifestyle habits of working unmarried men in their twenties to thirties	Dr. Keiko Koide
18.	A descriptive study of maternal mortality in Maryland County, Liberia, Jan. To Dec. 2017	Miss Minnie Horace

19.	Tackling early childhood obesity in the first 1001 critical days by utilizing a family-based approach. A literature review	Mrs. Felister Heeley
20.	Long Term Effectiveness of the International Child Development Programmes Programme (ICPD); a Study of a Group of Pakistani and Somali mothers living in Norway	Mrs. Grethe Savosnick
21.	New families - intervention program approach -a better approach for first -time fathers?	Pro Karin Galvin
22.	What Young People Seek and School Nurses Say: An analysis of ChatHealth Conversations	Dr. Karen Whitakker
23.	Current status and issues regarding Child - Rearing Support Network in Japan	Dr. Nobuko Matsuda
24.	Perception of Nursing Students on Clinical Learning in Kenya; A case of Kenya Methodist University	Prof. Anna Karami
25.	Treatment - related outcomes in South African HIV-infected persons with programmatically incurable Tuberculosis	Dr. Blize Pietersen
26.	Health Equity of Chinese Migrant in Africa under the belt and Road - The cases of Kenya	Miss Lou Yin
27.	Current Existing Knowledge of Emergency Care (emergency procedures) among Occupational Health Nurses in Japan	Dr. Yuko Matsuda
28.	Resident and Staff Perspectives of Person - Centered climate in Nursing Homes a Cross - Sectional Study	Prof. Feng Hui
29.	Determinants of Preconception Care Preparedness	Ms. Joyce Ombacho
30.	New Model for Practical Training for Public Health Nursing Students	Mrs. Anne-May Teige
31.	Developing a Recommended National Curriculum for UK Health Visitors and School Nurses	Dr. Karen Whittaker

SNO	TITLE	AUTHOR
32.	How to Develop and Implement Partnerships with a	Dr. Harriet Fields

	local NGO - Case study in Rwanda for “Grassroots Empowerment of women as Gatekeepers of the Health Community”	
33.	Significance of Sleep Hygiene in Public Health	Mrs. Beatrice Banda
34.	An Evaluation on use of routinely generated Health Information by District Health Managers in Thyolo and Chiradzulu District Hospitals	Mrs. Grace Sidande

Lessons Learned/experiences

Most LMICs have very low budget ceilings for health care services and rather run health care services that do not meet the needs of the populace. It is time to provide services that focus on achieving UHC. This theme resonates with the theme for Annual General Conference of Public Health Nurses Group Ghana “Integrating Reproductive, Neonatal, Maternal, Child and Adolescent health services with HIV, TB and malaria services: the Public Health Nurse leading the way”. The theme was declared on 27th January 2019 but the conference at Kenya gave me a better understanding of our theme.

I also picked some organizational skills that will enhance our conference from 18th - 21st September 2019. The Kenyans exhibited good teamwork and delegation of duties. There were seamless transitions between sessions, all hands were on deck and each one of them understood what they were doing. I have learnt teamwork better during the conference.

Personally, I had the opportunity to interact with some of the authors whose papers were cited for my research on home visiting to get first-hand information. I was motivated to re plan the Annual General Conference of the Public Health Nurses Group in Ghana; to feature both oral and poster presentations; which hither to were more of presentations from invited guests. Plans are under way to invite members from the Global Network who are interested and can fund themselves to the Ghana Conference slated for 18th – 21st September 2019.

Following the dissemination on the workshop to the Council Members (decision making body) of the Public Health Nurses Group Ghana, more than 15 Ghanaian Public Health Nurses have registered with GNPHN. Many more will be encouraged to do so during our soon coming Annual General Conference where a report on the GNPHN Conference would be presented.

Plans are also under way to lead the formation of the West African Chapter of GNPHN, though the group when formed will still be in the mother African Chapter of the GNPHN with the headquarters at Kenya. Formation of other Regional Chapters was encouraged by the Africa Chapter Executive Committee.

Summary and Conclusions

The 5th Global Network of Public Health Nursing conference held at Nairobi, Kenya from 14th to 16th May was an experience. There were three days of scientific sessions interlaced with concurrent sessions and panel discussions.

To conclude the conference was a learning and networking forum that shaped my world view on the role of the public health nurse in achieving UHC and for that matter accelerating SDG 3. Some of the research presented gave me a broader perspective of research I could embark upon to enhance public health nursing in Ghana.

It was highly beneficial to me because I had just been elected as the chairperson for the Public Health Nurses Group Ghana and was thinking of what to do differently to take the group to the international level. This conference paved the way for me. The sponsorship from ICCHNR through the McClymont Fund was timely. The valuable networks formed cannot be overemphasized. Meeting one of the authors whose work was referenced in my PhD Thesis was another memorable occasion I will forever cherish; and having the opportunity to serve as the Secretary to the Africa Chapter of GNPNS is more than “a dream come true”.

The conference has also thrown more light on feasible areas I can channel my scholarly works. The interest to review the Annual General Conferences of the Public Health Nurses Group in Ghana to scientific presentations is high. Hitherto, the conferences have been more of workshops and welfare meetings. Four participants have hinted they will present their papers at the Conference scheduled for 19th - 21st September 2019.

Recommendation

1. Participants were assured of a pen-drive/flash drive containing the proceedings of the conference hence many relied on that for dissemination of the conference at their various facilities. This could not be realised. It is therefore recommended that provision be made for available recordings of the daily proceedings or rapporteurs report by the planning committee during subsequent conferences. This would simplify report writing and successful dissemination of conference proceedings by participants.
2. Site visits: the visit to the health facilities provided an avenue to learn a few innovations in healthcare delivery; however, it would have also been appreciated if a sightseeing tour of the rich flora and fauna or culture of the hosting country is also considered by the planning the committee.

Appendix

1. Photos



Mary McClymont Scholar –
Dr Margareta Gloria Chandi, from Ghana

Report written by Margaretta Gloria Chandi

(SRN, SRM, PHN, B/A Nurs & Psychology, MPH, PhD)

Oral Presenter from Ghana sponsored by ICCHNR through the Mary McClymont fund

Tel: +233- 24 466 8548 / +233 – 20 466 8548 / 233 26 446 8548

Email: glomachand@yahoo.com

glonachandi@gmail.com