HIFA 2009 CHALLENGE

ADDRESSING THE INFORMATION NEEDS OF NURSES AND MIDWIVES IN DEVELOPING COUNTRIES

The scale of the crisis: evidence and statistics

What is the HIFA 2009 Challenge?
The HIFA 2009 Challenge is the second in a series of annual initiatives being launched by Healthcare Information for All by 2015, the global campaign which is working to ensure that everyone will have access to an informed healthcare provider by 2015. During 2009, we will be working with major stakeholders in the nursing, midwifery and medical fields to raise awareness of the crisis, and identifying ways to improve the provision of health information, and improve health outcomes. We call on governments and funding agencies to support all efforts to meet the needs of nurses and midwives so that people do not die because of a simple lack of basic healthcare information. And we call on individuals to join us via our website: www.hifa2015.org

Below you will find evidence, statistics and reports from the frontline of health care, all of which convey a shocking message: every day people are dying unnecessarily because nurses and midwives lack access to basic information and knowledge. What we present here is just the tip of an iceberg, a window into a hidden world of avoidable death and suffering.

Nursing
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“A typical patient in Africa has no such expectations about the role that information will play in her care. She knows that the nurse in the village’s one-room clinic has no computer to consult, no textbook, and maybe not even a telephone to call a neighbouring village for advice. There is simply no recourse to health information, no matter how complicated the case. The quality of care she receives, regardless of her condition, will be limited to whatever knowledge the nurse has retained from basic training.” SatelLife 2005. http://pda.healthnet.org/download/pdapaper1.pdf

“I have been working for more than twenty years as a public health nurse, routinely educating mothers on prevailing health problems. I’m still using the same knowledge to educate mothers on how to feed their babies. I feel like I’m not knowledgeable enough to give my clients updates, especially in this time of AIDS.” Human Resources for Health 2007, 5:18 http://www.human-resources-health.com/content/5/1/18


“The International Council of Nurses (ICN) estimates that there are more than 13 million nurses worldwide. Furthermore, nurses provide almost all primary health care in most low-income and middle-income countries. However, most nurses do not have the expertise to assess and treat mental health disorders.” Lancet 2007; 370:1016-1017; 22 September 2007 http://www.thelancet.com/journals/lancet/article/PIIS0140673607612513/fulltext

“There is a constant need for up to date text books and teaching aids for use in the nurses and midwives, and clinical officers training schools.” Mvumi Hospital, Tanzania http://www.mvumi.org/

Sierra Leone suffered greatly during a civil war in the 1990s. Book Aid International provided books to two hospitals in Freetown to support the training of their doctors and nurses. “The books have helped our training programme significantly. As a result we were able to take care of the war wounded during the crisis in Freetown we were the primary...
facility for the treatment of the war wounded during
the conflict. We performed over 900 different surgical
procedures... The books played a major part in our effort
to forestall a serious humanitarian disaster in Freetown as our
nurses and junior medical personnel were in a better state
of preparedness.” Kojo Carew, medical director,
Curney Barnes and Netland Hospitals, Sierra Leone.
careerfocus.bmjournals.com/cgi/content/full/326/7388/S75

“When we don’t give them a straight answer, they doubt our
knowledge, saying nurses do not know much nowadays.
We look like fools.” Human Resources for Health 2007,
resources-health.com/content/5/1/18

‘[The nurses] also complained about the lack of reference
material to help them remember the things they ought to
inform the mothers during infant feeding counselling:
“We are overworked, and yet even when you are very
tired you are expected to remember all the steps required
as written in books. Are we computers that remember
everything? We need to have something written down to
refer to when counselling mothers.”‘ Human Resources
http://www.human-resources-health.com/content/5/1/18

Midwifery
“I am told that in many parts of the world it is traditional for
an expectant mother to say goodbye to her husband and
other children when she goes in to labour understanding
that she may not see them again.... 80 per cent of these
deaths - over 400,000 women [per year] - are still completely
avoidable. .....The explanation for these deaths and health
problems - is simple and terrible - when a mother faces a
problem, there is no trained health worker on hand to help
them.” Sarah Brown, wife of Gordon Brown, Prime Minister,
UK. http://www.number10.gov.uk/Page15155

“In Sierra Leone, one in eight mothers dies in childbirth.
It is an astonishing and appalling statistic. There are only
18 midwives in a country of 6 million people. There are only
200 nurses, only a 100 doctors. If we can’t help in midwifery
training and other things, then I believe that we will be
failing a generation of people who deserve our people.”
Prime Minister Gordon Brown, 2008 Clinton Global Initiative
Meeting. www.who.int/workforcealliance/Newsletter-GHWA-
151008v7.pdf

“Every minute a woman dies in pregnancy or childbirth....
And every year over one million newborns die within their
first 24 hours of life for lack of quality care. Maternal
mortality is the largest health inequity in the world; 99% of
maternal deaths occur in developing countries – half of
them in Africa. A woman in Niger faces a 1 in 7 chance
during her lifetime of dying of pregnancy-related causes,
while a woman in Sweden has 1 chance in 17 400.
Fortunately, the vast majority of maternal and newborn
deaths can be prevented with proven interventions to
ensure that every pregnancy is wanted and every birth is
safe.” Accelerating efforts to save the lives of women and
newborns. Joint statement on behalf of the UNICEF,
United Nations Population Fund, the World Bank and WHO.

“Lack of information and inadequate knowledge about
signs of complications of pregnancy; danger signals during
labour; and cultural practices are some of the reasons for
high mortality rate in Nigeria.”
Esther Obiyan, Programme Specialist, Maternal and
Child Health, UNICEF.

“In rural Sudan, we have seen a cyanotic, apnoic newborn
with a pulse be set aside following birth and left
to herself to initiate the process of spontaneous breathing.
After nearly two minutes of non-intervention by the delivery
attendants, we were compelled to step outside of our role
as observers and act quickly to provide stimulation and
positive pressure ventilation. The infant responded to manual
breaths and the outcome was good. Subsequent discussions
with the local staff indicated that the infant would have been
considered stillborn had she died... If just 1 in 100 stillbirths is
actually a poorly-resuscitated viable newborn, greater
than 30 000 lives could potentially be saved each year by
improving neonatal resuscitation practices in austere
settings.” Spector & Daga. Preventing those so-called
stillbirths. WHO Bull 2008 (Apr);86:315-316.
http://www.who.int/bulletin/volumes/86/4/07-
049924/en/index.html

www.hifa2015.org