

## Welcome from the Director

### Fostering positive practice environments



We are immersed in a global health workforce crisis – one marked by critical imbalances. Many countries are faced with the challenge of under-employed and unemployed health professionals side by side with dramatic shortages. The reasons for the crisis are varied and complex, but key

among them are unhealthy work environments. The ongoing underinvestment in the health sector, coupled with poor employment conditions and policies (such as exposure to occupational hazards, discrimination and physical and psychological violence; insufficient remuneration; unfavourable work-life balances; unreasonable work loads; limited career development opportunities, etc.) has resulted in a deterioration of working conditions in many countries. There is clear evidence globally that this has a serious negative impact on the recruitment and retention of health professionals, the productivity and performance of health facilities, and ultimately on patient outcomes.

Unhealthy environments affect nurses' physical and psychological health through the stress of heavy workloads, long hours, low professional status, difficult relations in the workplace, problems carrying out professional roles, and the introduction of a wide range of workplace hazards. Evidence indicates that nurses who experience long periods of job strain also experience an increase in sick time, conflict, job dissatisfaction, turnover, and inefficiency. A study of nurses in the United States, Canada, England, Scotland and Germany showed that 41% of hospital nurses were dissatisfied with their jobs and 22% planned to leave them in less than one year; findings confirmed the relationship between workplace stress and nurses' morale, job satisfaction, commitment to the organisation and intention to quit. Research undertaken in sub-Saharan Africa suggests that poor working conditions and job stress are two major reasons for nurse migration to other sectors and/or countries.

Yet there are environments that support excellence and decent work. Not only do they have the power to attract and retain staff but they improve patient satisfaction, safety and outcomes while containing costs to the system. These have come to be called Positive Practice Environments (PPEs). They are defined as settings that ensure the health, safety and personal well-being of staff, support quality patient care and improve the motivation, productivity and performance of individuals and organisations. Such environments are critical with regard to the retention and recruitment of personnel and crucial for the health and safety of patients, thus contributing positively to the overall performance – efficiency and effectiveness – of health systems. Still, much work needs to be done to make positive practice environments the norm across the health sector of all countries.

The International Council of Nurses has chosen PPE as the theme for the 2007 International Nurses Day (IND). Reference and promotional materials (i.e. IND kit and poster) provide critical tools for sensitizing health sector stakeholders, including the public, to the factors contributing to healthy work environments. These are available on the ICN website ([www.icn.ch/indkit.htm](http://www.icn.ch/indkit.htm)).

ICHRN continues to collect and make available valuable research and policy documents that inform sound policy-making, guide personnel management decisions and generate good practice through its Knowledge Library ([www.ichrn.org](http://www.ichrn.org)). A fact sheet on Positive Practice Environments can be found in the publications section of the ICHRN website. Please make use of these resources and feel free to contribute reference materials and documents that you have found useful in your work and workplace by contacting the ICHRN Secretariat ([ichrn.secretariat@icn.ch](mailto:ichrn.secretariat@icn.ch)).

We look forward to hearing from you.

**Dr Mireille Kingma**  
Director, ICHRN  
International Council of Nurses



### WHAT'S INSIDE

#### 2

#### What's new at the ICHRN

- ICN International Conference – Nurses at the Forefront: Dealing with the Unexpected
- New fact sheet series launched
- Spotlight interview: Dr Gilles Dussault
- Exploring nursing workforce policies
- Latest additions to ICHRN's Knowledge Library

#### 3

#### Featured news

- Survey reveals poor morale among Britain's nurses
- IMF policies and health spending in poor countries
- Advancing workers' health
- Work-related stress in developing countries

#### 4

#### Featured news continued

- Africa Health Workforce Observatory launched
- ICN releases new publication on occupational health and safety
- Nurses: love the job, but not the work environment
- The Lancet to feature human resources for health in upcoming special issue

#### Research briefs

- Professional development model proving to be effective
- Challenges faced by nurse-counsellors in Tanzania
- Nurses at increased risk for occupational asthma

#### Announcements

**Subscription to ICHRN eNews is free. Sign up today to receive biannual updates on the latest developments in nursing human resources. Visit [www.ichrn.org](http://www.ichrn.org) for details.**

The International Centre for Human Resources in Nursing was established in 2006 by the International Council of Nurses (ICN) and its premier foundation the Florence Nightingale International Foundation (FNIF). The Centre is dedicated to strengthening the nursing workforce globally through the development, ongoing monitoring and dissemination of comprehensive information and tools on nursing human resources policy, management, research and practice.

# ICN International Conference – Nurses at the Forefront: Dealing with the Unexpected

ICHRN was the host of a main session at the ICN International Conference in Yokohama, Japan titled *Reconstructing the Workforce*. Speakers included Professor James Buchan, Queen Margaret University; Dr Jostacio Moreno Lapitan, Emergency Preparedness and Health Programme, World Health Organization Centre for Health Development (WHO Kobe Centre); and Dr Mireille Kingma, ICHRN Director. Presentations covered a number of topics including the driving forces for changing skill mix, the challenges of health human resources management in post-conflict environments and what ICHRN is doing to address nursing workforce issues. Speaker presentations are available for download at [www.icn.ch/conference2007/presentations30may.htm](http://www.icn.ch/conference2007/presentations30may.htm)



ICN International Conference, *Nurses at the Forefront: Dealing with the Unexpected*, 27 May-1 June 2007, Yokohama, Japan  
Pictured: Dr Hiroko Minami, ICN President.

## Latest additions to ICHRN's Knowledge Library



**The ICHRN Knowledge Library continues to expand and now contains over 350 resources. Some of the latest additions include:**

*Community Health Workers: What Do We Know About Them?*

*Deteriorated External Work Environment, Heavy Workload and Nurses' Job Satisfaction and Turnover Intention*

*Developing and Sustaining Effective Teams*

*Health Workforce Innovations: A Synthesis of Four Promising Practices*

*Help Wanted: Confronting the Health Worker Crisis to Expand Access to HIV/AIDS Treatment - MSF Experience in Southern Africa*

*Human Becoming and 80/20: An Innovative Professional Development Model for Nurses*

*Human Resources Planning and the Production of Health: A Needs-Based Analytical Framework*

*Managing Attrition Rates for Student Nurses and Midwives - A Guide to Good Practice for Strategic Health Authorities and Higher Education Institutions*

*Positive Practice Environments: Quality Workplaces = Quality Patient Care*

*Raising Awareness of Stress at Work in Developing Countries: A Modern Hazard in a Traditional Working Environment*

*Strengthening Human Resources Information Systems*

**These resources, and many more, are available on the ICHRN website.**

## New fact sheet series launched

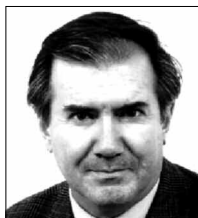


ICHRN has published the first two fact sheets in a series which will cover key HR related themes. The first, Positive Practice Environments (PPEs), describes critical elements and benefits of PPEs, explores the cost of unhealthy and unsafe workplaces and outlines ways to make

PPEs a reality. The second focuses on workplace bullying in the health sector – a widespread and growing phenomenon that has harmful effects on health care organisations and the health system as a whole, including patients.

Watch for the next fact sheet – the Policy Challenges of an Ageing Nursing Workforce – to be released before the end of the year. Fact sheets can be downloaded at [www.ichrn.org](http://www.ichrn.org)

## Dr Gilles Dussault – ICHRN's spotlight interview



In an interview with ICHRN, Dr Gilles Dussault speaks about scaling up the workforce in Africa, policy mechanisms to improve the geographic distribution of nurses and

how donors can best support improvements in health human resources policy and practice.

Dr Gilles Dussault is Professor and Head

of the Health Systems Unit at the Institute of Hygiene and Tropical Medicine, Universidade Nova de Lisboa, in Lisbon, Portugal. Prior to joining the Institute in August 2006, Dr Dussault was a Senior Health Specialist with the World Bank Institute in Washington, DC.

*Spotlight Interview* is a regular feature on the ICHRN website bringing you the latest word in health human resources from experts in the field. To read this interview and past ones, visit the website [www.ichrn.org](http://www.ichrn.org)

## Exploring nursing workforce policies and practices

The first two ICHRN case studies are underway to examine nursing workforce policies and associated HR practices in Ireland and Oman. These products will be made available on the website later in 2007. Check the website often for updates.

# Survey reveals poor morale among Britain's nurses

A survey commissioned by the Royal College of Nursing UK has found that nurses' morale is the lowest it has been in ten years. The survey, which involved 9,000 nurses from across the UK, shows optimism about job security, career progression and training has dropped to the lowest levels since 1997.

**Other key findings include:**

- More than one quarter of nurses surveyed report being obliged to hold a second job in order to meet financial needs.
- Concerns over redundancies among nurses have increased from 7 percent in 2005 to 35 percent in 2007. Only 34 percent of those surveyed felt the nursing profession offered them secure employment – a decline by more than half since 2005.
- Over half (55 percent) of nurses surveyed felt they were not able to provide the care they would like due to heavy workloads.
- Less than half (49 percent) stated they would recommend nursing as a career.
- One in four nurses said they would leave nursing if they could.
- 87 percent of respondents felt they were underpaid compared with other professionals.

RCN general secretary Peter Carter was quoted in the Guardian News as saying: "To have such a large part of the nursing workforce genuinely worried about the security of their employment is simply unacceptable. Despite feeling undervalued, underpaid and under threat our nurses continue to put in the hours and dedication to deliver high quality patient care. In the week that nurses are receiving ballot papers on proposed industrial action this survey demonstrates to the Government that nurses' goodwill is at breaking point."

The survey titled *Holding on: Nurses' employment and morale in 2007* is available for download at: [www.rcn.org.uk/publications/pdf/003181.pdf](http://www.rcn.org.uk/publications/pdf/003181.pdf)

Source: RCN (2007). New survey shows nurse morale at ten year low. Available: [www.rcn.org.uk/news/display.php?ID=2499&area=Press](http://www.rcn.org.uk/news/display.php?ID=2499&area=Press); Guardian News (2007). Nurses' morale at 10-year low. Available: [www.guardian.co.uk/uklatest/story/0,,-6787057,00.html](http://www.guardian.co.uk/uklatest/story/0,,-6787057,00.html)

## Advancing workers' health

The International Labour Organization estimates that some 2.2 million lives are lost each year as a result of occupational related injuries and illnesses. In addition to these deaths, 268 million workers are injured in accidents, and 160 million experience work related illnesses. Sadly, only a small minority of workers globally have access to occupational health services.

In an effort to advance the health of workers, the World Health Organization at its 2007 World Health Assembly endorsed a *Global Plan of Action on Workers' Health*. The plan aims to address a broad range of workers' health issues such as prevention of occupational hazards, protection and promotion of health at work and working conditions.

The International Council of Nurses, speaking for six health professions (dentistry, medicine, midwifery, nursing, pharmacy and physiotherapy), supported the plan and called for improved measures to protect, promote and improve the health, safety and well-being of health workers, particularly vulnerable groups such as migrant health workers. To access the *Global Plan of Action on Workers' Health*, visit: [www.who.int/gb/ebwha/pdf\\_files/WHA60/A60\\_20-en.pdf](http://www.who.int/gb/ebwha/pdf_files/WHA60/A60_20-en.pdf)

Source: WHO (2007). Workers' health: draft global plan of action; Takala J (2005). Introductory Report: Decent Work – Safe Work. ILO: Geneva. Available: [www.ilo.org/public/english/protection/safework/wdcongrs17/intrep.pdf](http://www.ilo.org/public/english/protection/safework/wdcongrs17/intrep.pdf); WHO (2005). Number of work-related accidents and illnesses continues to increase. Available: [www.who.int/mediacentre/news/releases/2005/pr18/en/](http://www.who.int/mediacentre/news/releases/2005/pr18/en/)

## Work-related stress in developing countries

The World Health Organization has published a brochure as part of its Protecting Workers' Health Series titled *Raising awareness of stress at work in developing countries: A modern hazard in a traditional working environment - Advice to employer and worker representatives*. The booklet aims to increase awareness among employers, workers and worker representatives about work-related stress in developing countries – an issue of growing concern in developing countries due to globalisation and the changing nature of work. According to WHO, "traditionally, the focus of Occupational Health and Safety initiatives is on chemical, biological and physical exposures, while the psychosocial risks at work are still largely neglected and their causes and consequences still insufficiently understood as they pertain to the developing country context. The current division between working conditions and the (physical) work environment makes the inclusion of the psychosocial risks at work harder to identify by most of the Occupational Health and Safety professionals."

Download the full text at [www.who.int/occupational\\_health/publications/pwh6pub.pdf](http://www.who.int/occupational_health/publications/pwh6pub.pdf)

Source: WHO (2007). Protecting Workers' Health Series No. 6 Raising awareness of stress at work in developing countries. Available: [www.who.int/occupational\\_health/publications/pwh6/en/index.html](http://www.who.int/occupational_health/publications/pwh6/en/index.html)

# IMF policies and health spending in poor countries

The Center for Global Development has published a report examining the International Monetary Fund's (IMF) macroeconomic policies and programmes and the impact they have on health care spending in poor countries.

The report, *Does the IMF Constrain Health Spending in Poor Countries? Evidence and an Agenda for Action*, which draws on in-depth case studies of Mozambique, Rwanda and Zambia, states that:

"IMF-supported fiscal programs have often been too conservative or risk-averse; that the IMF Board and management have not made sufficiently clear what is expected of IMF staff in exploring the macroeconomic consequences of alternative aid scenarios; and that wage bill ceilings have been overused in IMF programs and should be limited to the (probably rare) circumstances where a loss of control over payrolls threatens macroeconomic stability."

The report identifies a number of recommendations for action by the IMF Board and management. It is available at [www.cgdev.org/content/publications/detail/14103](http://www.cgdev.org/content/publications/detail/14103)

As highlighted by the International Council of Nurses in their recent work titled, *The Global Nursing Shortage: Priority Areas for Intervention*, caps on national spending are having a detrimental effect on the nursing workforce in a number of countries. Recruitment ceilings adopted by some governments have resulted in large numbers of unemployed nurses during a time of severe staff shortages. ICN believes governments and international financial institutions must work together to ensure informed macroeconomic decision-making that creates enabling fiscal environments supportive to workforce development and well-functioning, responsive health systems. Further, new and existing national agreements with the IMF or other financial institutions should not require or lead to freezes in the recruitment of health workers (including nurses), prevent payment of salaries, or prevent the hiring of unemployed health personnel.

See [www.icn.ch/global/report2006.pdf](http://www.icn.ch/global/report2006.pdf)

Source: Center for Global Development (2007). Does the IMF Constrain Health Spending in Poor Countries? Evidence and an Agenda For Action. Available: [www.cgdev.org/content/publications/detail/14103](http://www.cgdev.org/content/publications/detail/14103)

### Africa Health Workforce Observatory launched

The newly launched Africa Health Workforce Observatory is a collaborative initiative supported by the World Health Organization Regional Office for Africa. The Observatory promotes, develops and sustains the knowledge base for health human resources in the African region in order to provide evidence for informed health policy decisions. Monitoring and sharing of both positive and negative practices and experiences is part of the Observatory's mandate.

To learn more about the Observatory, visit [www.afro.who.int/hrh-observatory/index.html](http://www.afro.who.int/hrh-observatory/index.html)

### ICN releases new publication on occupational health and safety

Nurses worldwide continue to be exposed to serious and preventable workplace health and safety hazards. These range from biological (e.g. diseases such as TB, HIV/AIDS, SARS) to ergonomic (e.g. heavy lifting), psychosocial (e.g. violence and stress), chemical and physical (e.g. radiation, slips, trips and falls). The injuries and illnesses suffered by nurses as a result of such hazards have a serious negative impact on recruitment and retention and ultimately on patient care.

*Occupational Health and Safety Management Programme for Nurses*, written by Elaine Papp for the International Council of Nurses, examines these issues in greater detail, offers a framework for an occupational health and safety management programme and examines nurses' rights and responsibilities for health and safety.

The publication is available for download at [www.icn.ch/guideline\\_occupationalhealth.pdf](http://www.icn.ch/guideline_occupationalhealth.pdf)

## Announcements

#### National Experiences in Assessing and Reducing Shortcomings and Negative Trends Affecting Human Resources of the Health System

##### *An International Symposium on Health Workforce*

10-12 October, 2007

Lisbon, Portugal

For more information contact the Centre de Sociologie et de Démographie Médicales [www.rhs-portugal.org](http://www.rhs-portugal.org)

#### Asia Pacific Action Alliance on Human Resources for Health Conference

12-14 October, 2007

Beijing, China

[www.aaahrh.org/events.php](http://www.aaahrh.org/events.php)

### Nurses: love the job, but not the work environment

Findings from a study conducted for ICN involving 1000 nurses from 10 countries across Europe, North America, Asia and Africa show that nurses enjoy the work that they do, but the job itself is becoming increasingly challenging. Low nurse to patient ratios, long working hours, reduced time with patients due to increasing administrative tasks, shortages of qualified professionals – particularly the loss of skilled nurses through migration and relocation – together with inadequate compensation, contribute to discontent with the workplace. Some of the specific findings include:

- Positive aspects of the job are linked to good working relationships with physicians and mutual respect.
- Among the negative aspects of the job, most frequently cited were: too little time to care for patients, too much work, short staffing, low salaries and poor working conditions.
- While over 50% of nurses say they enjoy their work, only 25% consider the working conditions to be positive.

The survey results point to a number of key future issues for nurses. These include, in order of importance, better salaries, more time with patients, better training and education, better nurse: patient ratios, decent working conditions and access to continuing education.

Source: ICN (2007). Nurses: love the job, but not the work environment - The International Council of Nurses unveils new findings from a multi-country survey of nurses' worldwide. Available: [www.icn.ch/PR15\\_07.htm](http://www.icn.ch/PR15_07.htm)

### The Lancet to feature human resources for health in upcoming special issue

The Lancet has issued a call for papers for a special issue on human resources for health (HRH). The publication will coincide with the Global Health Workforce Forum on HRH taking place in Kampala, Uganda from 4 -7 March 2008. The call for papers is available at: [www.thelancet.com/journals/lancet/article/PIIS0140673607613142/fulltext](http://www.thelancet.com/journals/lancet/article/PIIS0140673607613142/fulltext)

#### Skill Mix and Workforce Development: Sharing the Lessons Learnt

22-23 November, 2007

Melbourne, Australia

[www.changechampions.com.au/](http://www.changechampions.com.au/)

#### The Global Health Workforce Alliance Forum 2008

*Health Workforce: The Key to Better Health*

4-7 March, 2008

Kampala, Uganda

[www.ghwa.org/](http://www.ghwa.org/)

#### Geneva Health Forum: Strengthening Health Systems and the Global Health Workforce

25-28 May 2008

Geneva, Switzerland

[www.genevahealthforum.hug-ge.ch/](http://www.genevahealthforum.hug-ge.ch/)

### Professional development model proving to be effective

An innovative model of employment titled the *80/20 Human Becoming Patient-centered Care Professional Development Model* is proving to be an effective strategy for improving nurses' work life and quality of patient care in Canada. In this model, nurses spend 80 percent of their paid time providing patient care and the other 20 percent of their paid time undertaking professional development, reflective practice activities, and learning about patient-centred care. The results from a two-year study evaluating the model are promising. For example, findings show no staff turnover at the end of the study period; increased patient and staff satisfaction; a reduction in overtime hours; low sick time; and a reduction in length of stay by 0.9 days. Importantly, the study found that these positive results can be achieved with no significant increase in staff costs.

Source: Bournes DA & Ferguson-Paré M (2007). Human becoming and 80/20: An innovative professional development model for nurses. *Nursing Science Quarterly*, 20: 237-253.

### Challenges faced by nurse-counsellors in Tanzania

Findings from a small study examining the experiences of nurses working as infant feeding counsellors to HIV-positive mothers in a region of northern Tanzania reveal high levels of stress and frustration. Lack of training and preparation for the role, limited access to updated tools and reference material, as well as heavy workloads were among some of the documented factors contributing to high levels of stress and frustration among study participants.

Source: Leshabari SC, Blystad A, de Paoli M & Moland KM (2007). HIV and infant feeding counselling: challenges faced by nurse-counsellors in northern Tanzania. *Human Resources for Health*, 5:18. Available at: [www.human-resources-health.com/content/pdf/1478-4491-5-18.pdf](http://www.human-resources-health.com/content/pdf/1478-4491-5-18.pdf)

### Nurses at increased risk for occupational asthma

Study findings published in a recent issue of *The Lancet* reveal that nurses are twice as likely as other workers to develop occupational asthma. The researchers suggest the increased risk among nurses is attributable to exposure to "sensitizing substances, respiratory allergens, and irritants including sterilizers and disinfectants such as glutaraldehyde or bleach, as well as latex in the early 1990s." The study also found that conditions in the workplace may be responsible for 25% of new asthma cases in the developed world.

Employers must do more to reduce the incidence and impact of asthma in the workplace.

Source: Vann M (2007). Nurses, Printers at Increased Asthma Risk - 1 in 4 new cases linked to on-the-job exposures, research suggests. Available: [www.nlm.nih.gov/medlineplus/news/fullstory\\_52783.html](http://www.nlm.nih.gov/medlineplus/news/fullstory_52783.html)