Global Partnership Advances Medical-Surgical Nursing in Rwanda

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After the 1994 Genocide Against the Tutsi, Rwanda worked with international organizations to dramatically improve the country’s health care system, reduce disease and poverty, and help ensure citizens’ right to peace. Better nursing care is an essential part of the equation, and nursing has now become a respected and sought after profession in the country.

This year, AMSN was one of several nursing associations helping to support the first cohort of MScN students. The association donated virtual memberships and is providing the nurses with access to the latest AMSN publications, continuing education, and practice standards. The ability to obtain these types of resources, unprecedented for these practitioners, will help them realize their potential as change agents, role models, and global nurse citizens.

Background and Context

Rwanda is one of the fastest developing nations in sub-Saharan Africa and a hub for global health partnerships. In 1994, the Genocide Against the Tutsi claimed the lives of roughly 1 million Tutsi and moderate Hutu leaving behind destruction, poverty, a fractured economic system, and devastating consequences for the health care scenario.

In the past 22 years, the Rwandan government, under the auspices of the Ministry of Health (MOH) and in collaboration with countless international nongovernmental organizations (NGOs), has drastically bettered health access and delivery in keeping with the United Nations (UN) Millennium Development Goals (MDGs; UN Development Programme [UNDP], 2013).

Incredible progress has been made in halting and reversing HIV, tuberculosis, and malaria. There is increased access to improved sanitation and a significant reduction in maternal mortality and mortality rates in children under 5 years (World Health Organization, 2015).

Rwanda is now primed to readily achieve the UN’s Sustainable Development Goals (SDGs) by 2030, a global development agenda that strives to address the root causes of poverty and ensure all citizens’ rights to peace, well-being, and environmental/planetary health (UNDP, 2016).

Med-surg MScN students gather at the University Teaching Hospital of Kigali (CHUK) for clinical rotations. Back row, from left: Eugenie Nyirabazungu, Vestine Mukayoboka, Fulgence Maniriho, Priscille Yamuragiye, Aloys Niyomugabo, Deborah Mukamahirwa, Diane Muhimpundu. Front row from left: Sylvestre Ntirenganya and Leontine Ingabire.

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Nursing in Rwanda

Rwanda’s current population is approximately 11.5 million (National Institute of Statistics of Rwanda, 2016). Throughout the health care system, there continues to be major barriers to sufficient staffing, resources, and necessary educational preparation.

In 2012, the MOH collaborated with global partners to create the Human Resources for Health (HRH) Program, a 7-year initiative between Rwandan health care affiliates and a U.S.-based consortium of medical centers and nursing, public health, and dentistry schools.

The goals: increase the quality of health care services; increase the total number of adequately trained professionals in nursing, medicine, health management, and oral health throughout the country; and increase the autonomy of Rwandan health care professionals (Binagwaho et al., 2013; MOH, n.d.).

Of specific consideration to nursing education is to increase the total number of nurses and midwives prepared at the A0 level (baccalaureate equivalent) and the number of nurses with A1 level (associates degree equivalent) qualifications upgraded from A2 (secondary school training program).

Nursing is advancing quickly in Rwanda. In the past, students have been mandated to nursing as a vocation based on secondary school marks. Now, however, it is becoming a desirable and sought after career path. Young people are now choosing to become nurses to help their families and communities, improve health care access and delivery, alleviate the suffering of the vulnerable, and to make a reliable decision toward economic autonomy.

Rwandan nurses are now held to standards of practice and licensure by the National Council of Nurses and Midwives, formed in 2008, and represented by the Rwanda Nurses and Midwives Union.

Due to many of these efforts, nursing is becoming respected by both the MOH and society at large as a responsible and powerful profession. Nurses are now leading or being targeted to lead health initiatives, organizations, accreditation programs, monitoring and evaluation services, performance-based financing, and community health offices. Nurses are being recognized as unique contributors to health care capable of influencing the necessary changes for improved quality services.

Rwanda’s First MScN Program and the Medical-Surgical Specialty

As a result of the HRH Program, U.S. faculty and Rwandan colleagues partnered to create the country’s first Masters of Science in Nursing (MScN) program. This 2-year degree program grants students specialty certification in one of eight tracks: critical care, oncology, nephrology, pediatrics, leadership and management, neonatology, perioperative, and medical-surgical nursing. Previously, nurses desiring advanced education were required...
As students are trained to be graduate level medical-surgical nurses, there is an opportunity to advance critical thinking, leadership, and research skills.

to travel out of the country. Currently over 100 students are preparing to end their first year of education and, as of this writing, are taking part in their first focused clinical rotations.

The MScN program brings new hope for the autonomy and expertise of nursing practice in Rwanda. Nurses have always been viewed as subservient to physicians and caught in the confines of a hierarchical society. This makes true interdisciplinary communication and collaboration challenging, if not impossible.

As students are trained to be graduate level medical-surgical nurses, there is an opportunity to advance critical thinking, leadership, and research skills. These graduates will be accountable for improving medical-surgical protocols and empowering nursing with evidence-based practices to change irrelevant habits and systems.

Nurses did not previously feel they possessed the skills to perform research, but now these advanced clinicians will be able to lead research initiatives, create new knowledge, and improve patient safety. There is a renewed pride in nursing, nursing ethics, and nursing language.

For example, students in the MScN program now take pride in nursing care plans to promote the role of nursing among interdisciplinary colleagues, demonstrate the depth of nursing knowledge, and provide evidence to improve overall care delivery.

Many of the medical-surgical nursing students are determined to become change agents and role models to transform patient care. They are committed to becoming global nurse citizens, creating new possibilities of contributing to health care throughout the East African Region and worldwide.

Graduate education in medical-surgical nursing gives clinicians the knowledge in scientific concepts, patient care applications, and the systems leadership needed to advance nursing as both a discipline and a profession.

AMS N and Rwanda

In April 2016, AMSN graciously donated 16 virtual memberships to Rwandan nurses. They will have unprecedented resources in helping them realize their potential and build an advanced level of practice for themselves and their patients. These memberships fill a dire professional development gap in the careers of these future graduates.

With access to continuing education, updates and practice standards for medical-surgical practitioners, MEDSURG Nursing Journal and other AMSN publications, students will have unprecedented resources in realizing their potential as change agents, role models, and global nurse citizens. Through AMSN’s provision of information on policymaking, evidence-based knowledge, scope of practice, and the laws affecting American nursing, Rwandan medical-surgical nurses can gain the valuable information needed to guide and build an advanced level of practice for themselves and their patients, an opportunity they simply would not have access to otherwise.
In addition to AMSN, many other international organizations have joined this collaborative to support the first cohort of MScN students in Rwanda. The American Nephrology Nurses Association (ANNA), the Oncology Nursing Society (ONS), the American Association of Critical-Care Nurses (AACN), and the Association of periOperative Registered Nurses (AORN) have all made generous donations to advancing the practice and education of their respective specialty track students.

Because of these associations’ willingness to make a positive impact on the global wellbeing of the nursing profession, the Rwandan students will receive opportunities and resources that were previously unavailable due to financial restrictions.

AMSN, in conjunction with this mini-consortium of American associations, has redefined what it means to advocate for nurses and nursing worldwide. These organizations have proven that we are so much stronger together than apart and that we are so much more alike than different. Because of these efforts, it is safe to say that the future of nursing in Rwanda is bright, to say the least.

**Onward**

The only way forward is to ensure that Rwandan faculty are equipped to become autonomous leaders of the University of Rwanda MScN program. Clear goals and measures need to be established to ensure sustainability.

This program is the product of cross-cultural contributions and major financial investments, and without planning for sustainability, it will make all of these efforts useless. Sustainability will become the reward.

Rwandan autonomy is a way to perpetuate the legacy of global partnerships, a way of saying “thank you” to all of those individuals and organizations who have contributed their time and energy for the betterment of Rwandan health care and the nursing profession.

The journey is still long but the first steps are being taken. PhD preparation needs to be promoted to advance nursing science and sustain a thriving MScN program run by adequately prepared Rwandan faculty.

As the collaboration with international partners continues, the long-term plan needs to focus on the continued development of educational opportunities. Rwandans need to become their own role models to maintain sustainability for the benefit of the nation.

When they graduate, the MScN medical-surgical students will have the ability and opportunity to provide a more holistic and comprehensive education for a tremendous portion of the Rwandan population.
sive education for a tremendous por-
tion of the Rwandan population. They will be the ones advancing
skills and awareness for patients, empowering families to care for their
loved ones with accurate knowledge, and addressing how to prevent both
communicable and noncommunicable diseases in rural and urban areas
throughout Rwanda.

They are the change agents and
the leaders of nursing. AMSN’s role
in their professional development
makes this possible. It is a contribu-
tion that will be long remembered
and celebrated not only by the
MScN program students and faculty
at the University of Rwanda, but by
every patient who receives the
informed, expert, and compassion-
ate care of an MScN prepared med-
cal-surgical nurse.

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