



Understanding global health challenges and the importance of cultural and international knowledge mobilisation.

Professor Sally Hardy, Director of NICHE@UEA (10th October 2024)

NICHE has been advancing partnerships internationally through working with countries that share a common theme of addressing health inequalities across coastal, rural and isolated communities. We have seen our NICHE fellows attending international conferences, sharing their work, and ensuring lessons learned from evidence-based innovations that can be scaled and utilised in other countries. Our evidence reveals how globally we are dealing with similar issues of workforce skills and attributes to maximise system level transformation.

I have had the privilege of working overseas on a series of projects exploring mental and maternal health awareness, addressing the growing impact of climate change on health inequalities. These projects have *ignited* new understandings and highlighted first hand, how entire communities can be devasted by the impact of severe weather (e.g., floods, fires, droughts and tornados for example), alongside the impact of manmade disasters (e.g., bombings, shootings, war crimes) that can leave whole communities in traumatised states. These two aspects of our changing global patterns are termed as natural and man-made disasters.

According to Cvetkovic et al, (2024), during 1990 – 2024 there have been a total of 25, 836 disasters recorded worldwide, of which 70% were natural, and 30% man-made. They go on to identify how droughts and floods are the most devastating in terms of human lives lost, and long-term economic impact (as livelihoods are lost and food crops, water security is destroyed). Their paper highlights an urgent need for *innovations* in research and disaster management strategies, where countries are learning from and with each other, in how best to address the challenges and impact these disasters leave in their wake.

The effects of climate change raise greatest adversity to those with significant health related inequalities (Mooney, 2021; Dodd et al, 2023). Yet, there has been little *innovation* in research and policy change despite significant evidence of increasing and escalating catastrophic consequences of traumatic global events. Political strategic direction for health and social care aims to develop an integrated, whole systems approach, positioning people, their communities and what matters to them, at the heart of reform. This involves collaborative, citizen-centred effective strategies, engaging targeted resources (i.e., the health and social care workforce) effectively across place-based systems (NHS 2016, 2019, 2020). Advancing this agenda requires a workforce with the knowledge, skills and expertise to address and work from a trauma informed agenda, engaging their local communities with sensitivity and humility, in binding expertise to co-create and *embed* advances in what really does matter in terms of culturally sensitive health agendas.

The World Health Organisation's (WHO) global health strategy points to the creation of approximately 40 million new health and social care jobs globally are needed to ensure a broad range of health services can deliver what is necessary to ensure healthy lives for all (WHO, 2016:13). Yet how best to prepare the workforce to achieve culturally sensitive innovations also remains a limited area of research and knowledge.

NHS England funded a Mental Health Awareness programme in Sri Lanka. Over the past three years the programme has been delivered to over 300 nursing students and practitioners, as a week-long education programme that has been highly evaluated.





Since that programme began, we have managed to build several key relationships with partners in Sri Lanka, where we are now exploring student and faculty exchange, and working with local charities to advance practice changes. For example, in my most recent visit, I had the privilege of visiting the Eastern Province of Sri Lanka and attending a public health clinic and the regional hospital. The staff were keen to share the great work they were doing in managing an increased rise in Leprosy and other skin conditions, (they identified as associated with contaminated water) plus how their interventions with local communities had a positive impact on low birth weights and child malnutrition. Perhaps the most impressive was meeting a group of mothers and their young children, who had engaged with the World Vision project PDHearth¹, where cooking and hygiene activities were showing benefits in not just children's weight gain, but in how empowered the mothers were in speaking passionately and discussing openly the local health and wellbeing needs of their communities.

Working with the Caribbean via our connections with the University of West Indies (UWI) has focused on maternal health and midwifery education. We visited UWI MONA (see NICHE newsletter 8) and facilitated two workshops; one on perinatal mental health and the second, on the importance of leadership in service level improvements with our wonderful colleagues from the Caribbean Nursing and Midwifery Association² based in the UK. We had the privilege of visiting the maternity hospitals, and discussed the changing patterns of maternal health and wellbeing, plus how staff were engaging with communities to understand more of the local issues of water and food security as weather patterns change. Dehydration has a devastating impact on mothers and their unborn babies, which had led to the regional neonatal unit being one of their busiest units in Jamaica, was just one example we observed and discussed.

In UWI Trinidad and Tobago, I was invited to facilitate a stakeholder workshop looking to develop a new MSc in Trauma and Mental health, where we explored the vision, values and associated requirements of a curriculum that could prepare the workforce for future disaster management and engage in trauma informed approaches with communities. The two days were a brilliant reminder of how bringing people together with a shared vision for improvement, brings out the passion and creative ideas. The groups worked tirelessly to shape and share expertise required to make the curriculum highly valuable to future needs of communities across the Caribbean. (You can read more of that event in our next NICHE newsletter).

Norfolk may seem a 'world away' from these countries, however our goal in NICHE is to share our learning across and from our partners, locally, regionally, and internationally. We have seen real synergies in themes and opportunities for learning and collaboration with all our partners. Our work has local significance but global relevance. There is still so much to learn from understanding the global workforce, and the knowledge mobilisation that working internationally brings. We aim to continue to spread the ability to share knowledge and explore a growing evidence base with others, as we live and work together to inform and shape our future.

According to Fadiloglulari, (2023) ³ there are several benefits to being culturally aware that impacts many aspects of our lives and wellbeing.

¹ World Vision PD Hearth project: https://www.worldvision.org.uk/about/blogs/how-world-vision-combats-malnutrition/ (last accessed 9/10/24)

² CNMA UK: https://cnmassociation.co.uk (last accessed 9/10/24)

³ What are the benefits of cultural awareness? https://www.goabroad.com/articles/benefits-of-cultural-awareness





- It makes you more socially aware. Being culturally aware raises knowledge and understanding that there are different ways of perceiving things. Engaging diverse participants to achieve activities brings new insight and added value to any accomplishments.
- It can improve your communication skills. Being aware of other cultures and expectations in terms of what is offensive in some cultures, and learning how to behave to develop relationships based on mutual understanding are crucial aspects to ensuring you can be relaxed and comfortable around others.
- It awakens new perspectives. Cultural awareness challenges our assumptions, and ensures you are open to having new perspectives on things, and a broad horizon of possibilities. Empathy and decision making are known to improve when people travel and explore new cultures. Creating meaningful connections is all that matters.
- Being culturally aware can be useful at interviews, as it shows employers you have gained experience and can work with people from different backgrounds and cultures than your own.

Studies have shown health care students bring back a number of critical insights in terms of understanding the differences between the UK health system and other countries, when experiencing overseas placements (Browne, 2020; Grant and McKenna, 2003; Green et al, 2008), returning to the UK with renewed appreciation of the National Health Service (NHS).

Multiple stakeholders were and are required when dealing with global health emergencies and this was seen and experienced most publicly during the COVI-19 pandemic. Yet more work is needed to advance our workforce capacities in learning and sustaining improvements and innovations achieved. NICHE will continue to engage with our international collaborating partners to work together to address the rise in global health challenges. I encourage you all to explore your own communities and to experience the joy of engaging with new cultural experiences, whether at home or overseas. I know the work I and colleagues have been participating with has changed us in ways we never imagined. It has brought a renewed sense of purpose when working to achieve humane kindness and compassion in what can sometimes feel like a very harsh reality of global disaster and persistent change.

REFERENCES

Browne, C. A. (2020). *Development of a framework for successful international clinical placements: A case study of Australian Bachelor of Nursing students studying abroad in Asia* (Doctoral dissertation, Murdoch University).

Cvetković, V. M., Renner, R., Aleksova, B., & Lukić, T. (2024). Geospatial and Temporal Patterns of Natural and Man-Made (Technological) Disasters (1900–2024): Insights from Different Socio-Economic and Demographic Perspectives. *Applied Sciences*, *14*(18), 8129.

Dodd, S., Gorst, S. L., Young, A., Lucas, S. W., & Williamson, P. R. (2023). Patient participation impacts outcome domain selection in core outcome sets for research: an updated systematic review. *Journal of Clinical Epidemiology*, *158*, 127-133.

Grant, E., & McKenna, L. (2003). International clinical placements for undergraduate students. *Journal of Clinical Nursing*, 12, 529-535

Green, B.F., Johansson, I., Rosser, M., Tengnah, C. & Segrott, J. (2008). Studying abroad: A multiple case study of nursing students' international experiences. *Nurse Education Today, 28,* 981-992

Mooney, H. A. (2010). The ecosystem-service chain and the biological diversity crisis. *Philosophical Transactions of the Royal Society B: Biological Sciences*, *365*(1537), 31-39.

NHS England Review (2016) https://www.england.nhs.uk/2017/01/2016-review/





NHS Improvement, (2022) https://www.gov.uk/government/organisations/nhs-improvement

NHS Long term Plan (2019) https://www.longtermplan.nhs.uk

NHS Long Term Workforce Plan (2023). https://www.england.nhs.uk/publication/nhs-long-term-workforce-plan/

NHS People Plan (2020) https://www.england.nhs.uk/ournhspeople/

World Health Organization. (2016). Global strategy on human resources for health: workforce 2030.