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Nurses involvement in policy making, service delivery and evaluation of Nigeria's HIV/AIDS response program

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Statement of Problem: The recent HIV prevalence survey data has shown significant drop in HIV prevalence in Nigeria from 5.8% in 2001 to 1.4% in 2019. This resulted from more than two decades of collective action by several stakeholders implementing the multi-sectoral HIV/AIDS response covering prevention, treatment, care and support. Health workers have been at the centre of implementation of this program in a health care system characterized by persistent inter-professional rivalry and power games which have affected the contributions of various professional cadres to the program. This study examined the extent to which nurses have been involved in the decision-making process, in service delivery and in the recently concluded National AIDS Impact and Indicator Survey.

Methodology: A qualitative design was used for a select group of 400 nurses - 200 from the north and 200 from the southern parts of the country. Data was collected through in-depth interviews, administration of questionnaires addressing specific variables on Nurses involvement in policy formulation, service delivery and program evaluation and complemented by 3 focus group discussions. This was preceded by a desk review focusing on the national health policies, strategic plans and frameworks and implementation data. The theoretical framework for this study was informed by the Critical Social Theory (CST) and Power Theory which enabled an understanding of the barriers, power issues and inequities in our societies.

Findings: Finding from the study indicates that, fewer nurses (18%) alluded to being involved in making decisions, 70% of nurses perceived they were adequately involved in the provision of care while only 8% were involved in monitoring and evaluation.

Conclusion and Significance: This study points to inadequate involvement of nurses both at the policy level and in monitoring and evaluation which may well explain the quality of care issues which have characterized the program since its inception. This study will help policy makers and planners in repositioning the response for better outcomes of nurses both at the policy level and in monitoring and evaluation of the program. As a key stakeholder in service delivery, inadequate involvement of nurses in these critical areas may well explain the quality of care issues which have characterized the program since its inception. This study will help policy makers and planners in repositioning the response for better outcomes.

Biography

Godwin Asuquo is an international public health leader with about 20 years' experience in nursing, reproductive health and child rights, governance, HIV/AIDS/ TB and primary health care program management including health systems strengthening. He has consistently worked in senior leadership positions delivering impactful results for communities served in Africa including Nigeria, Chad, Senegal, Egypt, Morocco, Ethiopia, Rwanda, South Africa and Tanzania. Tasks undertaken during these assignments range from policy development, program management, training, research, organizational development, and strengthening capacity for HIV/AIDS, obstetrical care and human resources for health. He was the Chief of Party/Program Director for Save the Children's Global Fund Program in Tanzania till June, 2018. He is currently providing leadership to the Africa Centre for Health Leadership in Nigeria. Previously, he served as Primary Health Coordinator, Nurse and midwives Educator and a Lecturer in Public Health and Nursing at the University of Maiduguri and Imo State University in Nigeria.

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