



ETNA BULLETIN No.3, April 2014

Welcome to ETNA's third Bulletin!

1. The international on-line compassion survey

In January, Professor Papadopoulos - the ETNA president- requested the collaboration of ETNA members and members of her mailing list 'transcultural-eunet-l@mdx.ac.uk ' for a survey on compassion. The response was fantastic! Eighteen countries from all over the world are now taking part in the on-line survey. Although the survey will close at the end of April, the data that have been collected so far are most informative. The survey will enable us to collect definitions of compassion which can be explored for cultural differences. Opinions on whether compassion can be taught and the level that is actually taught to student nurses is also being collected. Data are also collected on the value of compassion by patients and whether nurses receive compassion from their colleagues, patients and managers. It is hoped that the analysis will be completed by the summer, so WATCH THIS SPACE!

Thanks to Rena Papadopoulos, ETNA's President, for sharing this opportunity with ETNA members. Thanks all ETNA members' willingness to participate in this project.

2. Femicide Across Europe

Femicide, or the intentional murder of a woman (or girl) because she is female, is the seventh leading cause of premature death for women globally. Research worldwide shows that some three-quarters of all femicides are perpetrated by an intimate partner or family member. While femicide and its prevention are more acceptable objects of study in the United States, in Europe they are still sadly lacking. Moreover, as migration increases in Europe, femicide appears to be on the rise, although to date comparative data are unavailable on the subject.

In order to understand and combat femicide, a group of researchers secured the support of COST (www.cost.eu) to network and take action.

COST Action IS1206 (www.femicide.net) is aimed at coordinating the study of femicide across Europe from the bottom-up, while allowing for collaboration across countries. COST does not restrict itself to academic researcher networking, but welcomes the involvement of practitioners - from the health professions, lawyers, police, women's organisations, and so on -who join the Action and exchange their expertise at the local and national levels. COST has afforded the opportunity to coordinate fragmented interdisciplinary research, some which is only just emerging.

The COST Action IS1206, which only began last year, has set up four working groups (WGs) in Europe. The first to discuss definitions (what is femicide? what do we include?), the second to start comparing data collection and reporting, the third to explore cultural issues ("honor killings", gender inequality in cultures, intimate partner murder etc.), and the fourth to tackle prevention (with NGOs, health specialists and so on).

All four working groups are salient to transcultural nursing. The definition of femicide affects how nursing will deal with the phenomenon. At the Action's first meeting in Jerusalem on "Definitions", Professor Jacquelyn Campbell, Anna D. Wolf Chair and Professor at the Johns Hopkins University School of Nursing in the United States, presented a paper on "Femicide as the murder of women: Advantages and disadvantages of an A-political approach". Her presentation covered international and U.S. homicide rates and what they tell us about femicide (including data bases, rates disaggregated by gender, rates by regions), other forms of intimate partner death and a discussion of femicide in connection with infant and maternal mortality, and IPV-HIV issues.

Reporting and monitoring is also important for practitioners to expand their knowledge of the extent of the issue and its prevention. Finally, the working group on culture is of direct relevance to transcultural nursing, which aims at increasing cultural awareness, sensitivity and knowledge about cultural practices, while examining how gender is viewed in each culture. While the goal is for health professionals to become culturally competent, it is important to find out how culture and social values impact on health, even in extreme cases, such as femicide.

Thanks to Dr. Shalva Weil *Hebrew University of Jerusalem, Israel*, COST Action IS1206 Chair, for sharing this with ETNA members.

3. Nursing Leadership in Global Health Symposium, Vanderbilt University, Nashville, Tennessee

Many people immediately associate Nashville with Country and Western Music however although that may be true I was invited to join a Symposium on Global Health organised by the Vanderbilt Institute of Global Health. Held in February this year, the bulk of the participants were from the US with a few from other parts of the world such as the Middle East and Africa and two from the UK. One of the keynote speakers was HRH Princess Muna al Hussein from Jordan who brought with her several senior nurses from that country.

The subtitle for the Symposium was *Developing pathways for effective Advocacy and Action* and it began with an exploration of those pathways providing an overview of Nursing in Global Health. Keynote speeches were given by a number of well known and internationally orientated professionals such as David Benton from the UK, the CEO of the International Council of Nurses, and Judith Oulton from Canada associated both with ICN and WHO.



Each day provided opportunities for Breakout sessions where small groups met to exchange ideas and hear presentations on specific aspects of Global Health. These came under the headings of Leadership and Management, Policy, Advocacy and Field engagement. It was good too to hear of the work in Kenya and the bid to empower women, and the story of the Frontier Nursing service in the US which has now led to a University offering Distance Learning.

Nurses need to be aware of the importance of being involved in policy making and develop skills of advocacy to speak up for those who are not yet empowered to do so. Senator Bill Frisk (also a Cardiac Surgeon) spoke of the need for Global Health Diplomacy as a tool to bring understanding in today's world.

There was much to take away from this meeting in terms of nurses having

a stronger voice and speaking out with understanding of the situation in the world where we are working and knowing where and how we can make a difference.

Finally another of our members was there from Israel who made the local papers the next day with a heading of 'Global nursing conference fosters harmony. She had been able to meet and talk with a nurse from Saudi Arabia and agreed to share their research on the elderly.

Thanks to Eileen Richardson, ETNA's Vice President, for sharing this experience.

4. Infectious Disease Screening with Migrant Population in Ireland

A new document is being drafted by the Irish Health Protection and Surveillance Centre. It is specifically related to Infectious Disease Screening with Migrant Population in Ireland and some recommendations and guidelines. This draft document is due to be on-line soon on the HPSC website - for public consultation www.hpsc.ie

The article below relates to the health screening of asylum seekers and refugees and is related reading to the above.

Brennan M et al. 'Asylum Seeker Health': Are we doing enough ? In *Clinical Guide for Irish Nurses - Journal of Nursing in the Community*- 14 (4). Winter 2013/14

Thanks to PJ Boyle for sharing this information.

5. Commonwealth Nurses Federation 2014 Conference- Nurses and Midwives: Agents for Change. Royal College of Physicians, London

This was the second conference of the Commonwealth Nurses Federation and as before it was held in London but on this occasion the venue was the Royal College of Physicians this made it particularly nice.

The title of the Conference was *Nurses and Midwives: Agents for change* and one of the important decisions which was made was to include Midwives in the membership and in the title of the organisation. In terms of Global Health of course Midwives who are delivering and caring for babies and the mothers over the period of their pregnancy are very much part of the provision of global health.

It is always good to see members of the British Commonwealth come together and it helps to remind us of our past history. Culturally there is quite a different feel to this meeting to any other. I believe that the presence of those members from African and Caribbean countries lend

their love of music and colour to give a very special ambience to the event. Members also came from Malaysia, Canada, Malta, Cyprus, Australia, India, Singapore, Pakistan and of course the UK.

The main themes of the conference were Workforce issues, Primary Health Care, Quality Health care, Mental Health and Maternal and Child Health. There were a number of special keynote speakers and one of the most memorable for me was Dr Soumitra Pathare from the Centre for Mental Health Law and Policy, the Indian Law Society. His presentation on Mental Health care in India took one back to the 19th Century a time when patients were padlocked to their beds. Concern about Mental Health care was also integral to the presentation of Elizabeth Oywer from the Kenyan Nursing Council who told of the shortage of Institutions providing Mental Health Nursing Education in the country. However many of the presentations were very positive and the level of academic excellence was noticeable. Clearly Maternal and Child Health was an important part of the discourse as was Primary Health Care.

A singular feature of this conference is the way it concludes by having everyone in the Conference Hall hold hands to sing Auld Lang Syne. This ends the event on a happy note as the music starts to catch hold and there is joy everywhere around.

Thanks Eileen Richardson, ETNA's Vice President, for sharing this experience

6. ETNA's homepage. Please visit it and help us to improve it

<http://www.europeantransculturalnurses.eu/>

7. Next ETNA Conference is planned to be held in **Budapest in June 2015**. We will keep you posted.

8. Next Bulletin will be send to you in July 2014. Please send us news you wish to publish in the bulletins and we will endeavour to include them.

The aim of the bulletins is to share information and raise awareness on matters related to Transcultural Health.

