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Global partnerships in transformation of nursing and midwifery education in Africa: A systematic scoping review protocol

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Abstract

Background

In recent decades, the literature on global partnerships in nursing and midwifery education, for the purpose of enhancing quality of education, strengthening health care system, and achieving universal health coverage is on the rise in Africa. However, there is a gap regarding the best practices and barriers in the African context. The purpose of this systematic scoping review is to map the evidence on global partnerships in transforming nursing and midwifery education in Africa.

Methods

A search will be conducted with the use of the following electronic databases: Cumulative Index to Nursing and Applied Health Literature [CINAHL], PubMed, Cochrane Library, and Google Scholar. Grey literature will be searched via the World Health Organization's website to locate relevant policies and guidelines. The search will be limited to work published in English from July 2013 to June 2023. All located resources will be exported to Endnote X8. All duplicates will be removed during when the abstracts are screened. Two independent reviewers will screen and extract the full text of the selected articles. Thematic analysis will be used to analyze data from this systematic scoping review.

Discussion:

Mapping the evidence on global partnerships in transforming nursing and midwifery education in Africa will outline the best practices and preferences for sustainable collaboration. The review will also highlight knowledge gaps and limitations that could inform for future research projects.

Registration: <https://osf.io/h83cy>

BACKGROUND

Nurses and midwives are essential components of national health systems since they constitute more than a half of all the global health workforce [1]. Nurses and midwives are increasingly expected to fulfil roles that require skills that extend beyond bedside nursing in complex and changing health systems [2]. Nurse and midwifery leaders therefore hold the key for strengthening health systems [3]. Global disparities in the quantity and quality of the health workforce remain a challenge for strengthening today's health care systems to achieve universal health coverage and the Sustainable Development Goals by 2030 [4].

Africa has a severe shortage of health workforce in the world [5]. By 2030, the World Health Organization [6] a shortfall of 18 million of health workers in low and middle-income countries. Nurses and midwives constitute 66% of health workforce in the African region [7]. Countries are required to ensure an adequate number of nurses and midwives to match or surpass national health system demand and who also have the required competencies to meet their own health priorities [8]. As a result, nursing and midwifery

academic programs must be competency-based, meet quality and safety standards and align with population health needs [8, 9]. Competency-based approach is the most effective approach to ensure preparation of health professional graduates for practice [10]. More than twenty African countries moved toward the implementation of competency-based curricula in nursing and midwifery education with rapid adoption of new technologies for teaching and learning [7].

Competency-based curricula (CBC) in nursing and midwifery education promotes the culture of professionalism, accountability, collaboration and a client-centered approach with positive health outcomes [11]. In order to achieve this, faculty must be properly trained in innovative teaching strategies, be able to use technology and demonstrate clinical expertise in their area of specialization [3]. However, transition to innovative teaching strategies has been slow due to inadequate preparation of faculty members who lack confidence because they were taught in the traditional content-based curriculum [12]. Collaboration between nursing and midwifery institutions and global partners is required to improve their education and their working conditions [3, 13].

Partnerships are a strategy whereby academic institution collaborate are able to meet their needs by sharing resources, capabilities and skills [14]. Nursing and midwifery African schools are struggling to provide quality of education in current vibrant working environment that imposes rapidly changing competencies requirements. In addition, there are poor working conditions, lack of professionalism and few professional development opportunities in Africa [13]. Global partnerships provide opportunities for continuous professional development for both students and faculty members. Through partnership, the implementation of competency-based curriculum is enhanced to ensure preparedness of practice among nurses and midwives for universal health coverage [10] through capacity building of nurse and midwifery educators and exchange of academic materials.

Partnerships have been established to raise the visibility of unmet needs and provide common platforms to work together by combining the relative strength of different stakeholders [15]. Successful nursing and midwifery schools are mostly likely to collaborate with other disciplines, clinical sites, professional organizations and international partners [16]. The development and use of partnerships is one of the areas for resource mobilization to strengthen the quality of nursing and midwifery education in CBC through faculty/students' exchanges and recruitment of visiting experts in different areas of specialization. This strategy is in line with the work of Muraraneza, Mtshali [17] who recommend that nursing and midwifery schools that have limited resources need networks with other academic partners for harnessing global teaching resources and innovations. These partnerships are essential for schools who require assistance as CBC equips graduates with competencies that allow them to respond to the changing health needs of the population [18, 19].

Partnership programs are an opportunity to achieve mutual benefits to overcome challenges [20] such as brain drain through supporting skills transfer [9]. According to the same authors, mutual benefit is the cornerstone of successful partnership and its sustainability. This reciprocity can be achieved through training and empowerment of human resources, developing, and improving educational programs,

sharing academic resources, facilitating the production and implementing knowledge into practice [20]. Further, the purpose, objectives, timeframe, structure and functioning of partnerships should be regularly reviewed and modified [21] based on arising needs or priorities of partners. In some cases, partnerships could have an independent external evaluation or, more commonly, a self-monitoring mechanism [15]. Partners should have shared goals and address barriers for sustainable collaboration in a timely fashion in order to maintain mutual trust [10]. The notion of common positive outcomes and joint collaboration, planning and implementation of practices is central to academic service partnerships [22]. According to the World Health Organisation [18], institutions who engage in partnership with global partners experience mutual benefits, experience skills transfer and have less international migration of health workers.

Little is known about partnerships among nursing and midwifery schools in Africa in the literature. The authors aim to address this gap by mapping the evidence about partnerships in transformation of nursing and midwifery education in Africa.

METHODS

A systematic scoping review of grey and peer-reviewed literature in relation to global academic partnership in nursing and midwifery education in Africa will be conducted. The review will be guided by the Arksey and O'Malley's methodology framework [23], its advanced methodology framework by Levac, Colquhoun and O'Brien [24] and Joanna Briggs Institute's methodological guidance [25] through five stages: (1) Identifying the research question, (2) Identifying relevant studies, (3) Study selection, (4) Charting the data, and (5) Collecting, summarizing and reporting the results.

Stage 1: Identifying the research questions.

The following research questions will guide this review:

1.1. What evidence is available in the literature on global partnerships in transforming nursing and midwifery education in Africa?

1.2 What are the main contribution of these studies in transforming nursing and midwifery education in Africa?

1.3 What are the knowledge and research gaps in the literature on the global partnership in transforming nursing and midwifery education in Africa?

Stage 2: Identifying relevant studies.

The Population-Concept-Context [PCC] will be used to determine eligible studies and guide the selection process [25] See Table 1. In this systematic scoping review, the search strategy will be underpinned by the inclusion criteria. A comprehensive search will include peer-reviewed journal articles and grey literature on partnership to enhance quality of nursing and midwifery in Africa via the following databases such as Cumulative Index to Nursing and Applied Health Literature [CINAHL], PubMed, Cochrane Library, and

google scholar. Search terms will be *partnership OR collaboration OR academic partnership OR Academic service collaboration AND nursing OR midwifery education*. A search of the grey literature will be done through the World Health Organization website to locate relevant policies and guidelines. Additional articles will be located through an iterative process whereby cited articles of included studies will be explored for possible inclusion. According to the Joanna Briggs Institute [25], the search is iterative as the reviewer become more familiar with evidence, which in turn suggests additional key words and sources that may incorporated into the search strategy.

Only studies on global partnerships in nursing and midwifery education within African countries published in English between July 2013 and June 2023 will be considered in this systematic scoping review. Related studies conducted outside of Africa and those published before July 2013 and after June 2023 will be excluded See Table 3. The retrieved literature will be exported and managed by Endnote X8 to remove duplicates and an Excel spreadsheet will be used as tool for data extraction for the selected studies.

Stage 3: Study selection

The selection of studies will eliminate those that do not help the authors to answer the research questions of the systematic scoping review [26], or that do not meet the pre-determined inclusion criteria so as to minimize the risk of bias and thereby promote the credibility of findings [26]. See Table 3. The first author [CM] will pilot the initial search in one electronic database to refine the final key words using the key words via the title and abstract and then finally using the full text. A senior librarian at the University of Rwanda will assist in this search process. The full texts will be retrieved and the last author [LW] will assist to find difficult to access full text versions of the articles. All resources deemed to be relevant will be exported to Endnote X8 whereby duplicates will be removed at the end of the data entering process. The search process will be reported using PRISMA chart extended for scoping reviews [27] as indicated in Fig. 1. Two independent reviewers [CM and DM] will decide on studies that meet inclusion criteria. Discrepancies will be solved by consensus with a member of the team [OB] for final decision.

Quality assessment

In this systematic scoping review, the quality of studies will not be assessed. The scoping review will be conducted to have a comprehensive summary of the literature on this particular phenomenon regardless of their quality [23]

Stage 4: Charting the data

Data charting consists of extracting descriptive summary of the results in line with the systematic scoping review questions. In this systematic scoping review, the use of the data chart will be piloted by extracting data from three resources by the first author [CM] see Table 2. The findings will be discussed with the whole team to confirm the validity of the tool, before the tool is used for data collection. Three independent reviewers [CM, KG and DM] will extract the data. This process should involve at least two

reviewers to reduce errors and bias through the use of a standardized table [25]. The data charting table might be updated at the review stage with some refinements should it be needed so that the objectives and research questions of scoping review may be met [25]

Stage 5: Collecting, summarizing and reporting the results

Extracted data will be summarized and reported in ways that answer the research questions with focus on what is known in relation to partnerships in transforming nursing and midwifery education in Africa. Similarities of extracted findings will be summarized and analyzed together to generate coherent information in different themes that can inform best practices and barriers to global partnerships in transformation of nursing and midwifery education in Africa. Gaps in the literature will be highlighted and recommendations for future studies will be made. Drawing evidences and synthetizing data under a particular topic answer pressing questions for end users to inform policy, research, and practice [25]. This systematic scoping review will provide a summary for decision makers about phenomenon and how it has been studied over time that might inform future research agenda and other systematic reviews [25].

Thematic analysis will be used to analyze data from this systematic scoping review. This analysis approach consists of coding, theme development with possibility of capturing the meaning of the data in inductive and / or deductive ways [28, 29].

DISCUSSION

Global partnerships play a vital role in the transformation of nursing and midwifery education in Africa since there is a pressing need to strength health systems through the production of competent nurses and midwives. Competency-based curricula, as a standard of nursing and midwifery education in Africa, requires training institutions to draw upon resources from outside their countries [17] in order to mobilize global knowledge and resources.

The reviewers of this systematic scoping review anticipate mapping the best practices and preferred ways of working in partnerships in nursing and midwifery education in Africa over the past 10 years. Possible gaps and future research projects will also be identified in the process. This review will be limited on studies conducted in African countries and the findings might not be relevant outside of Africa. Some relevant studies published in other languages such as French in the same context might affect credibility of information in this systematic scoping review. The findings will be disseminated in an international academic journal and presented in conferences on health professional education and health system strengthening.

Abbreviations

CINAHL

Cumulative Index to Nursing and Applied Health Literature

CBC

Competency-based curricula
PCC
Population-Concept-Context

Declarations

Acknowledgements

Not applicable at the moment

Authors' contribution

CM: Conceptualized the project, drafted the protocol and register the protocol, **DM, KG** and **OB** gave input in protocol development, **LW** critical read and give final comments to the protocol.

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Availability of data and materials

Further information can be obtained from the corresponding author upon reasonable request

Ethical approval and consent to participate

Not applicable

Consent for publication

Not applicable

Competing interests

None

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Tables

Tables 1 to 3 are available in the Supplementary Files section.

Figures

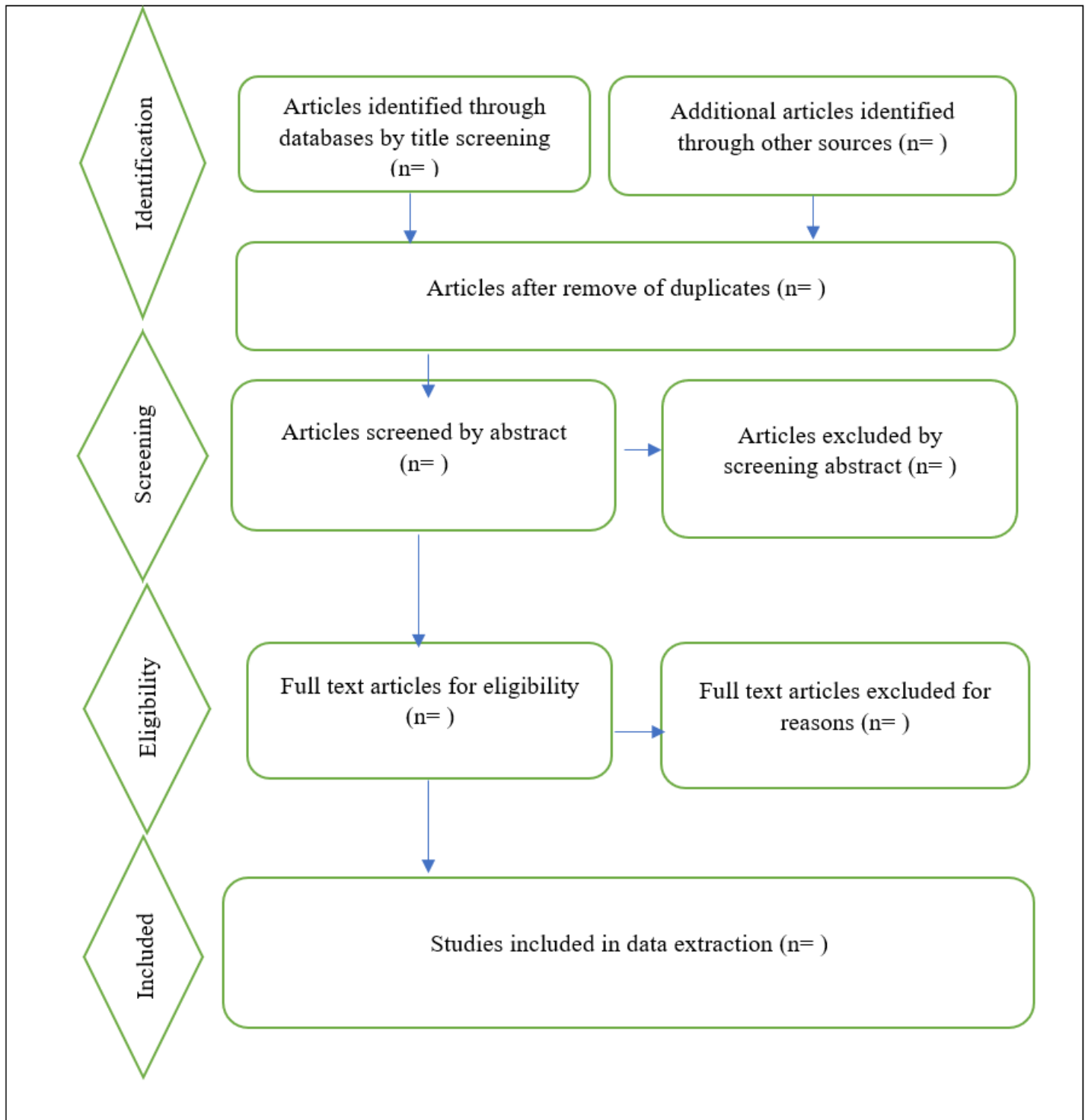


Figure 1

Prisma chart

Supplementary Files

This is a list of supplementary files associated with this preprint. Click to download.

- [PRISMA2020checklistb.pdf](#)
- [Table1.docx](#)
- [Table2.docx](#)
- [Table3.docx](#)