INTERNATIONAL COUNCIL OF NURSES (ICN)

BIENNIAL CONFERENCE

MALTA, 4-8 MAY 2011

HOSTED BY THE

MALTA UNION OF NURSES AND MIDWIVES

THEME

NURSES DRIVING ACCESS, QUALITY AND HEALTH

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1. OPENING CEREMONY

The official Opening Ceremony of the conference took place on Thursday evening, the 5th of May 2011 by the Prime Minister of Malta. During the ceremony, the traditional Parade of Nations took place; there were several speeches and the formal presentation of the Partners in Development Award\(^1\). A special Maltese cultural programme was provided.

2. VENUE OF THE CONFERENCE

The ICN Biennial conference took place at the Mediterranean Conference Centre (MCC) in Valetta, Malta. The MCC is located in a restored 16th century building that used to be the former "Sacra Imfermeria" (hospital) of the Knights of the Order of St John of Jerusalem.

3. CONFERENCE OVERVIEW

3.1 PROGRAMME

Each day of the programme\(^2\) provided a plenary session, followed by several main sessions, network meetings, symposia, concurrent sessions (both presentations and posters) and last but not least a continuous virtual classroom.

3.2 MAGNITUDE OF PRESENTATIONS

Although the biennial conference is usually smaller than the quadrennial congress, there was an abundance of sessions on offer, representing the conference theme and ICN pillars.

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\(^1\) The Partner's in Development Award was presented to Becton Dickinson and Company for their support for the Wellness Centers for Health Workers in several African countries.

\(^2\) The full programme is available from the NAB Office.
### DAY 1, THURSDAY 5 MAY 2011

#### 4.1 KEYNOTE ADDRESS

The keynote address (plenary session) on Thursday the 5\textsuperscript{th} of May 2011: “Nurses Driving Access, Quality and Health”, was presented by Dr. Diana Mason (USA). The keynote address set the stage for the conference and included a broad overview of what constitutes access, quality and health. Diane Mason addressed a range of issues that constitute access, quality and health, she talked to the scope and impact of nurses in driving these issues forward and identified areas where nursing needs to increase its focus or influence.

#### 4.2 MAIN SESSIONS

The ES selected three main sessions to attend, including the following:

##### 4.2.1 Millennium Development Goals and Primary Health Care.

The topic was addressed by T. Gwagwa (South Africa), A. Kumbangsile (Suriname) and D. Cerasa (Australia). The presenters addressed the challenges and achievements in health related MDG’s, discussed the current status of the health related MDG’s and highlighted the nursing contributions to the MDG’s.

##### 4.2.2 Changing Scopes of Practice.

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3 ICN serves as a network hub for the international exchange of ideas, experience and expertise for the nursing profession. Currently, 11 networks exist under ICN.

4 Symposium

5 Concurrent session

6 The virtual classroom is an informal setting where focus groups, workshops and training sessions are held for all conference participants.
Speakers included P. Roodbol (Netherlands), M. Flynn (Ireland) and G. Moyo (Tanzania). In the context of how currently health care systems and scopes of nursing practice are evolving, the presenters identified the status of advanced nursing practice in the Netherlands and the changing scope of nursing worldwide, elaborated on the state of nurse prescribing in Ireland and reflected on the experiences in Tanzania.

4.2.3 Debate: Mandatory Vaccination of Health Professionals.

S. Kong (CNF) and H.R.H. Ahmad (Malaysia) held a measured debate with L. Silas and L. Bell (both from Canada) about mandatory vaccination as this became a hot topic during the recent global H1N1 pandemic. Determining the place of mandatory vaccination for health care workers is a challenging and dynamic debate. Some in favor emphasize the duty of care (public security) and less absenteeism (efficiency), whilst those opposed emphasize the risk of adverse events (personnel security) and coercion (liberty and individual rights). Following the debate, the audience voted against mandatory vaccination.

4.3 NETWORK

The ES selected one nursing network meeting on the 5th of May, this being the Nurse Education Network. The topic of the network meeting was “Shaping the future of nursing education; two key reports and a network update. This was the first ever meeting of the Nurse Education Network since its launch. Speakers included D. Benton (ICN) and L. Bolton (USA). The status of the network and its future plans were discussed. In addition, two recent papers calling for transformation of nursing education were addressed.

5. DAY 2, FRIDAY 6 MAY 2011

5.1 PLENARY SESSION

Today’s plenary speaker was the First Lady of Rwanda, Jeannette Kagame.

The First Lady addressed the role of women in building healthy societies and that ensuring the education of girls is paramount. She illustrated this with many examples of the new Rwanda (the only country with more than 50% women in parliament). Ms. Kagame plays an important role in gender issues and equality in Rwanda and is involved in many organizations benefiting widows and orphans of the Rwanda Genocide and the HIV/AIDS pandemic.

5.2 MAIN SESSIONS

After the plenary session, the ES selected two main sessions to attend, including the following:

### 5.2.1 Positive Practice Environments.

Currently, many nurses work in poor quality workplaces. This undermines the organization’s performance encourage attrition and/or migration of health workers. Three speakers addressed the issues from their perspective, A.E. Marroquin (El Salvador), J. Yunibhand (Thailand) and I. Needham (Switzerland).

### 5.2.2 Task shifting and the Nursing Curriculum.

Speakers outlined the main issues for consideration in relation to new cadres of workers and identified implications for nurses’ roles, functions and salaries. The presenters, including R. Bard (Canada), P. Carter (UK) and T. Dauti (Zambia) illustrated that whilst nursing’s scope is expanding, numbers, types and categories of new health workers are increasing around the world, resulting in concerns about quality assurance, registration and competence issues and the impact on the nursing profession.

### 5.3 FLORENCE NIGHTINGALE INTERNATIONAL FOUNDATION (FNIF)

The FNIF 8th biennial fundraising luncheon took place at the Casino Maltese on Friday the 6th of May 2011. This luncheon takes place during ICN congress to raise funds for the Foundation. The FNIF, inter alia, sponsors the Girl Child Education Fund. The lunch was marked by two events, (1) the launching of the Florence Nightingale Bear in support of the Girl Child Education Fund and (2) conferring Dr Liisa Hallila, a Finnish nurse entrepreneur, working across borders, with the 2011 International Achievement Award, bestowed by ICN’s Florence Nightingale International Foundation (FNIF). The FNIF Board selected Dr Hallila for her outstanding contribution to nursing education and management in many regions of the world.

### 5.4 NETWORK

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8 The Girl Child Education Fund (GCEF) supports the primary and secondary schooling of girls under the age of 18 in developing countries whose nurse-parent or parents have died, paying for school fees, uniforms, shoes and books. GCEF works in partnership with member National Nurses Associations to ensure that the money goes directly to education costs. Every girl in the program is paired with a nurse volunteer to monitor her progress at school and at home.

9 [www.gcefbear.com](http://www.gcefbear.com)
In the afternoon the ES attended the ICN Regulation Network, in order to learn more about current issues in regulation, especially on the impact of globalization, to enhance communication and possible contributions to the network. Speakers included V. Darko (Ghana), B. Al-Kuwaiti (Bahrain) and C. Reed (New Zealand). The presenters described what types of collaboration takes place in their regions in terms of trade agreements, migration and globalization and the challenges involved. Ms. Darko provided a general perspective, whilst Ms. Al-Kuwaiti addressed cooperation between six Middle Eastern States and Ms. Reed described the cooperation between New Zealand and Australia.

6. **DAY 3, SATURDAY 7 MAY 2011**

6.1 **PLENARY SESSION**

Alice Darkoa Asare-Alottey from Ghana addressed the conference on “Social Movements: Health Systems Transformation”. She explained that Health Social Movements (HSMs) are an important political force concerning health access and quality of care, as well as for broader change. She emphasized that that HSMs often reflect locally grass roots movements rather than top-down decisions and implementation.

6.2 **MAIN SESSION**

The ES selected a session about Shaping and Evaluating Health Policy. The session was selected because it is increasingly recognized and understood that nurses’ involvement in shaping and evaluating health and nursing policy is critical to widen access to health services, improve quality of care and promoting higher levels of wellbeing in society and workplaces. G. Christensen (Denmark), S. Hisatsune (Japan) and D. Mason (USA) addressed innovative and effective activities in their respective countries regarding policy issues.

6.3 **NETWORK**

The ICN research network aims to serve as a vehicle for continual exchange of knowledge and experience. This network session served as a forum to exchange ideas, experience and expertise in nursing and health research and how to optimize the ICN research network. Speakers included A. Mottaz (France), C. Sironi (Italy) and F. Al-Rifae (UAE). Some countries have a national nursing research strategy in place whereas the e.g. the WHO has an advisory committee on research.

6.4 **VIRTUAL CLASSROOM**

The ES visited the Virtual Classroom to attend a session about the Dialogue on Diabetes and Depression (DDD), as NAB is involved in the implementation of the DDD project. Dr. T. Gebrehiwet (ICN) is the coordinator for this project. The project was initiated to allow nurses to benefit from new knowledge and related new developments in the area of
Diabetes and Depression. Participants examined and discussed some screening tools for the two conditions, action plans and case studies.

7. CLOSING SESSION

The closing session of the congress was held on Saturday afternoon the 7th of May at 16.30 hours. The main speaker was the Malta Minister of Health, Dr. J. Cassar and some more cultural entertainment was provided. Presentations were provided by Australia and Korea about the settings of the forthcoming congress (Melbourne 2013) and conference Seoul 2015.

8. CONCLUSION

The theme of the conference address “nurses driving access, quality and health”. The conference offered an opportunity to nurses’ worldwide to learn, share and celebrate achievements. The conference presented ample opportunities to strengthen nurses’ understanding of access and equity on health. It also emphasized how nurses can address these (Refer to the ICN 2011 Conference Programme). The venue of the conference was excellence with stunning views across the harbor. Catering was provided for all tastes for a reasonable price. Transport was free and efficient. The only set back was the absence of the Botswana delegation due to visa problems.

Last but not least, nurses were made well aware of the new global epidemic of non-communicable diseases (NCDs) that has become a significant threat to human health and development. Unless this is urgently addressed, the burden of NCDs would continue its dramatic increase, affecting all countries world wide. Nurses have a significant role to play in the control of NCD’s.