

✧ CLINICAL PAPER ✧

Kenya and distance education: A model to advance graduate nursing

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Kenya and distance education: A model to advance graduate nursing

Africa is faced with a myriad of challenges, such as HIV/AIDS, malaria, tuberculosis, and a variety of political and historical complications that have affected the educational system for advanced nursing practice. In Kenya, the current situation in the higher education sector does not give nurses an opportunity to pursue graduate education after they have acquired the basic diploma in nursing due to limited government support and the type of education system existing in the country today. Although distance education has been available in Kenya for professionals such as teachers, in public universities, this kind of opportunity is unreachable for nurses who are working and need to further their education. Nurses desire to have access to advanced practice education to equip them with the relevant knowledge to cope and address the complex health issues arising in the management and care of patients. A collaborative model is presented as a potential solution for this need. Four major constituents are identified including hospitals and agencies, communities of interest, Kenyan universities and international education partners. Each has a part to play including contributions to information, communication of opinion and expertise, money and support, infrastructure and in-kind resources. Distance education is cost-effective and will help in building capacity at various levels of nursing including leadership in clinical practice, teaching, administration and research.

Key words: advanced nursing practice, Africa, distance education, Kenya, nursing education.

INTRODUCTION

In 2009, the Republic of Kenya along with the World Health Organization, hosted nursing and midwifery leaders from 21 nations on the African continent to address nursing development within the context of primary care.¹ One important outcome from this meeting

recognized the need for advancing leaders who can manage change, influence public policy and regulation, and make evidence-based decisions. Pearson and Peels have recognized that nursing leadership can effectively lobby to improve health care access and negotiate evidence-based care.² Nurses in Kenya, in particular, are determined to improve working conditions and further their opportunities.³ The current situation in the Kenyan higher education sector does not give nurses an opportunity to pursue higher education after they have acquired the basic diploma in nursing because of lack of relevant

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government support and the type of education system existing in the country today. Graduate nursing education is one approach to address these desires. The purpose of this paper is to describe Kenya's potential for advancing graduate education for the nursing dilemma as well as to explore the potential of a distance education model for graduate nursing education. Although there are about 150 formidable distance education programs working in Sub-Saharan Africa, none includes a program that focuses on advanced practice nursing education.⁴ As such this article proposes the need to include advanced nursing education among these programs to curtail the severe shortage of nurses educated at higher levels caused by chronic underinvestment in health systems and health workforce development in particular.⁵

THE NEED FOR DISTANCE NURSING EDUCATION IN KENYA

Kenya is an East African country that was a British Colony and became independent in 1963. The system of education in Kenya was introduced by British colonists. After Kenya became independent, the Ominde Commission was set up to make changes in the educational system. The commission focused on a national education system that would foster national identity, unity and make it more responsive to the needs of the country. Since then the education system in the country has evolved and currently the education and training is governed by the Education Act of 1968 and other related Acts of Parliament, including the Teachers' Service Commission Act, Adult Education Act, University Act and various Acts and Charters for universities. However, although the government is committed to distance education, there is no section of the Ministry of Education responsible for such oversight.

Distance education and open learning has a very critical role in advancing the development of Africa as it plays a central part in enhancing participation and access in higher education, within the current context where demand far exceeds resources and opportunities available in the conventional contact institutions.³ Although distance education has been available in Kenya for professionals such as teachers, in public universities, this kind of opportunity is unreachable for nurses who are working and need to further their education and upgrade their professional status to higher positions. Significantly, there is no university providing distance education for nurses in the country.^{4,6}

Apart from South Africa, established universities providing distance education in Sub-Saharan Africa are very few and many of them focus on art-based courses and education.^{3,4} The nursing profession is faced with challenges to build capacity especially for purposes of teaching at university level and management of hospitals. Nurses have the desire and ambition to improve standards of clinical patient care in the busy hospitals and clinics. They realize that improving their education level and harnessing technology are some of the ways they can improve patient care. Thus nursing is very politically complex. The nursing workforce reports that 7000 nurses are unemployed and over 1300 graduate annually.^{3,6} In the case study by Rakuom, it is reported that despite the unemployment situation, almost every functional health facility in the country is understaffed; in particular there are over 500 dispensaries throughout the country having not a single nurse.⁶ Approximately 300–400 nurses migrate abroad and an average of 500 retire every year. Clearly this is a complex situation that requires attention and thorough analysis.

Ouagadougou Declaration of 2008 urges nations to implement strategies to address the human resource for health needs and aimed at better planning, strengthening of capacity of health training institutions, management, motivation and retention in order to enhance the coverage and quality of health care.⁷ These include the need to initiate research on a range of workforce issues including skill-mix and task shifting, factors influencing recruitment, retention and remuneration packages. Within this context, one must consider the advanced practice role for nurses and little opportunity to access higher education.

DISTANCE EDUCATION IN DEVELOPING COUNTRIES

Distance education or distance learning focuses on the pedagogy, technology and instructional system designs that aim to deliver education to students who are not physically 'on site' in a traditional classroom or campus. Distance education courses that require a physical on-site presence for any reason (including taking examinations) is considered a hybrid or blended course of study.⁸ It has been described as 'a process to create and provide access to learning when the source of information and the learners are separated by time and distance, or both'.⁸ In other words, distance learning is the process of creating an educational experience of equal quality for the learners to

best suit them outside the classroom. This emerging technology is becoming widely used in universities and institutions around the globe. With the recent trend of technological advance, distance learning is becoming more recognized for its potential in providing individualized attention and communication with students internationally. Distance learning is a flexible form of learning where a student can study from home, work, on the move or wherever else is convenient.

While distance education might be familiar technology oriented in developed countries and used in university campuses, it also is a revolution by increasing access and reform in higher education. On the other hand, distance education in developing countries may be viewed differently. In Sub-Saharan Africa, distance education has been used primarily to widen access to basic education and to improve quality in the conventional school system, for example through in-service training of teachers.⁸ In addition, programs are being created to provide college-level and vocational education to a young population that is desperately seeking to find opportunities for work and economic development. Africa is faced with a myriad of challenges, such as HIV/AIDS, malaria, tuberculosis, and a variety of political and historical complications that have affected the course of development. Approximately half of the entire African population is less than 20 years old, and population growth continues at an alarming rate.^{1,3} The result of this is that African governments, Kenya included, are unable to build college systems fast enough to absorb the increasing numbers of primary, secondary and college-level students. Successful distance education is one method that can provide access to this youthful and eager population to equip them to compete in the increasingly globalized world.

The phenomenal growth of distance and open learning systems around the world has drastically changed the educational scenario everywhere today. The conventional notions about teaching–learning are being replaced quickly by new ideas and strategies caused by the revolutionary changes continuously taking place in the media and communication in developing countries. Since the concept of education as an investment is also steadily gaining ground, even the poorest countries are slowly turning their attention to educational needs of their respective populations in order to survive and develop. As such distance education is viewed by many as a viable strategy to achieve the national educational goals quickly and low costs.⁶

Distance education in developing countries is provided in terms of what it can offer. The concerns are basic level such as: can some kind of education reach the people? How much will it cost and what are the requirements? Will there be appreciable degree of success in the course completion rates? Are there job opportunities for those who complete their studies through distance mode? Are there enough arrangements to provide education to those who want it, regardless of its value? These are frequent questions mainly asked by policy makers and administrators in the developing countries.^{9,10} The common feature found in these countries are: inadequate finances, poor communication and infrastructural facilities, lack of clear government policy on distance education, limited use of audiovisual media and technology, shortage of experts to develop multimedia courses, lack of financial and academic autonomy for distance-teaching institutions and low social and academic status of distance education because of quality issue.^{9–11}

Distance education has successfully been used to provide training in primary care in South Africa, epidemiology in Zimbabwe and China, and reproductive health in Nepal.¹⁰ The World Health Organization has identified 56 countries with critical health-care provider shortages in their health-care workforce. The University of Stony Brook, Stony Brook, NY, and the University of Asmara, Eritrea developed an innovative distance education program to prepare nursing faculty in Eritrea.⁸ The program is aimed at increasing the number of nurses prepared to take up academic roles in the school of nursing at Eritrea University. In the program, Eritrean graduate nursing students used distance education technologies and in-country clinical support to complete a program of study that prepared them for an advanced practice nursing and academic teaching role. The 10 students included in the program were all highly successful and graduated within the required four semesters of the program. As seen in the innovative collaborative project in Eritrea, distance education can be used to prepare academic teaching staff in other developing countries such as Kenya. In the Stony Brook/Asmara collaborative partnership, key program adaptations were necessary to maximize the potential for Eritrean students' success. Distance and time differences between faculty and students, limitations of the technological infrastructure within Eritrea, and variations between US and Eritrean culture and health-care practices all posed significant challenges. However, a complex collaborative process between professionals at

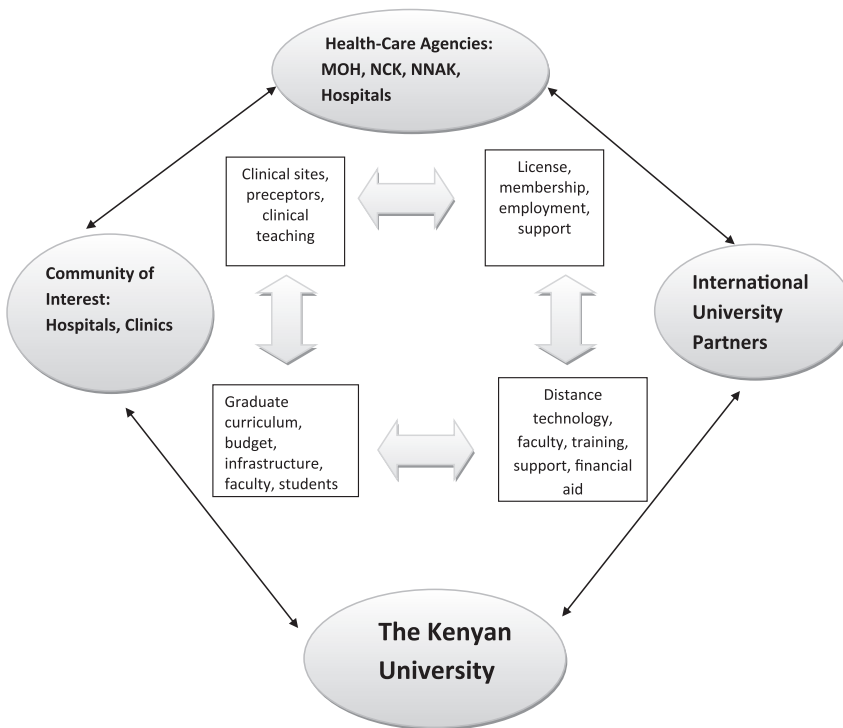


Figure 1. A model to advance graduate nursing in Kenya. MOH, Ministry of Health; NCK, Nursing Council of Kenya; NNAK, National Nurses Association of Kenya.

both participating universities and the Eritrean Ministry of Health was initiated in good time before students were enrolled. The Stony Brook faculty made trips to Asmara to conduct a pre-assessment of the university and clinical infrastructure to prepare for necessary modifications, fully orient students, faculty, administrators and preceptors. They made several key decisions during the process because Eritrean students did not have educational resources, study space, computers and Internet connectivity at home, school or work.⁸ Therefore a learning laboratory was set up within the University of Asmara for the sole use of Stony Brook students. The lab was funded by a United States Aid Grant that was monitored closely by the Dean of Health Sciences at Asmara. This is a good example of a meaningful and successful collaborative partnership that could be adopted by other partnerships in Africa.

A DISTANCE EDUCATION MODEL FOR GRADUATE NURSING EDUCATION IN KENYA

There is dire need to improve nurse and midwifery practice as well as to provide for an expanded scope of practice in other focused areas.^{3,9} As previously noted, the health-care sector in Kenya is faced with increasing morbidity and mortality, emergence and re-emergence of diseases

including HIV/AIDS and tuberculosis. Advanced practice nurses must have requisite knowledge, skills and ethical preparation to address the challenges posed by these problems.¹¹ In order to provide Kenyan working nurses with an opportunity to access higher education, there is need to introduce distant education programs into universities as this will allow the nurses to study while they are still providing services. The Nursing Council of Kenya (NCK) has pioneered in collaborating with the African Medical Research Foundation, The Aga Khan University and a number of hospitals in the country to initiate distance education for nurses.^{10,11} Although the NCK has made various attempts to collaborate with training institutions in providing upgraded education for nurses, none of the institutions is providing education at undergraduate or master's levels of education.

As presented in the distance education model (Fig. 1), collaboration from an education perspective means a synergistic initiative in partnership with colleagues and others who share common interests to accomplish clearly defined goals and objectives based upon an unadulterated desire to succeed in achieving those objectives. Four major constituents are identified including hospitals and agencies, communities of interest, Kenyan universities and international education partners. Each has a part to play including contributions to information, communication of opinion

and expertise, money and support, infrastructure and in-kind resources. This model is built on three significant tenets. The first principle is related to *championship for the model*. New collaborations need champions in order to drive the vision.¹² Champions may be administrators, faculty, staff, senior leadership or community members. They are comfortable in the collaboration and are perceived as the early adopters for strategies that enhance collaboration.¹³ Champions will assist and demonstrate leadership as challenges are presented and the focus on collaboration becomes difficult.¹⁴

Second is that the model will provide *mutual benefit* for each agency as multidirectional forces become dynamic. Academics can influence services and services can influence academics.¹⁵ Faculty have guided hospitals and community services in many health-care endeavors by bringing evidence and research to a collaboration. This influence also extends to the administrative role in the service. Agency and service needs have driven academic agendas in teaching and research. Because collaborations are multidirectional, each elemental unit needs the others in important ways. Within the context of the model, *Advancing Graduate Nursing in Kenya*, attention must be given to activities to ensure success and delivery of outcomes.

The third and last tenet is *building of relationships* for those involved in the collaboration. In order for those participating in the collaboration to evolve their relationship, they will be required to spend time together learning to communicate, respect and trust each other.^{16,17} Innovation and problem solving are relationship dependent, which in turn requires the stakeholders to focus on the manner in which they interact and communicate. Relationships among stakeholders evolve to foster trust among participants and advance the work of the vision.

Through model champions to advance the vision, realized mutual benefits and relationship trust a new collaborative culture can emerge. The new culture can transform the educational directive related to structure, distance education and technology, clinical training and employment support. Genuine collaboration means that there is a mutuality of interest and respect for symbiosis which can emerge from the efforts. It will be essential to foster teamwork by working toward achieving a common goal through close consultation. Universities in Kenya can develop distance education programs by developing innovative collaborations to introduce distance education in nursing education using this model or others.

DISCUSSION AND RECOMMENDATIONS

What differentiates distance education in developed countries from that in developing countries is the overall goals set. In the developed countries the broad aim is to provide education to individuals who require it at different levels with different individual needs; whereas in the developing countries the aim becomes collective such as nation building. Other educational goals include: eradication of poverty; rural development; health education; women's education; tribal education; education of the socially disadvantaged and any other community activities.^{1,3,9,11} In the *Model to Advance Graduate Nursing in Kenya*, champions for collaborative efforts, mutual benefits and relation trust can build a new educational culture. The forces and influences are dynamic and define the collaboration as activities outputs, outcomes and challenges move forward.

In distance education, the students are given the opportunity to pursue their studies in accordance with their particular needs. Instructional materials combined with other forms of support stimulate independent study. The learner is self-directed or in a group guided by interactive study and material provided by faculty who may be located in another continent away from the students. It is quite clear that distance education has its own nature. While the process of education is in progress, model partners, collaborators, faculty and students advance the shared goals toward improved access and education for advanced nursing education via distance education. All are participating in the shared experience and exploring a common world via a collaborative strategy.

Nurses desire to have access to advanced practice education to equip them with the relevant knowledge to cope and address the complex health issues arising in the management and care of patients. Distance education is cost-effective and will help in building capacity at various levels of nursing including leadership in clinical practice, teaching, administration and research. To make this possible it is recommended that Kenyan universities, both public and private, should look to emulate the example set by the NCK and establish genuine academic collaborations with partners abroad and within the country to initiate and develop distance-accessible higher education for nurses.

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