TGHN Workshop Report – COVID-19 Hub

How are Nurses in Africa facing the challenge?’

Introduction

On the 11th of May The Global Health Network (TGHN) supported the virtual workshop ‘How are Nurses in Africa facing the challenge?’. This workshop contributed to the workshop series on the COVID-19 response from various regions across the globe, organized by TGHN at the University of Oxford, UK in partnership with Global Research Nurses, a network which provides support, guidance and information to all nurses involved or interested in research. The workshop featured a panel of 4 experts from Nigeria, South Africa and Zambia.

A total of 373 people registered for the webinar across 72 hrs. On the day of the webinar more than 110 attended via zoom and +xxx viewed the session through live streaming via the Facebook page of TGHN, spanning 31 countries in North America, Europe, Africa Oceania and Asia.

The Workshop aimed to establish an open community of practice of nurses across Africa responding to the COVID-19 challenge focussing in particular on the following:

- How different African countries are reacting to the COVID-19 outbreak, on personal to national levels
- What are the current perceived research gaps which require urgent attention
- The existing tools or resources which could be useful to respond to these research gaps

Figure 1 Location of attendees. 114 participants attended the workshop from the 31 countries shaded in dark blue.
Summary of Panellist Presentations:

Halima Salisu (Nigeria)

Vice-Executive Director & Co-Founder at African Sepsis Alliance
Director of Communication & Media at African Federation of Critical Care Nurses

African health systems are fragile and lack infrastructure, resulting in enormous challenges to combat COVID-19: lack of sufficient ITU beds, ventilators, PPE and other essential IPC components. Building strong and resilient health systems across Africa, is the best defence not only against outbreaks and pandemics, but also against multiple health threats that we face daily.

Public health measures such as lockdown considered across African countries like Nigeria, have different levels of efficacy. Hand washing, one of the most widely supported measures for preventing the spread of the disease, is not feasible for 40% of the world population, especially amongst poor and vulnerable populations across Africa and Asia. Furthermore, as gross inequalities persist amongst and within LMICs, these measures might be worsening the situation. Investing in promoting health and preventing disease at the primary care level (e.g. providing proactive water resources) will not only save money and lives, would also further clarity.

The following research points were highlighted:

- Research GAP:
  - Measuring the scale and impact of the pandemic
  - Point-of-care diagnostics: improve testing and expedite testing times
  - Surveillance including case definition, local transmission, and hotspots
  - Therapeutic trials
  - Telemedicine / telenursing
  - Capacity building for front-line nurses in conducting research as well as education on IPC and emergency response to outbreaks & disasters.

- Research progress:

Regarding the ongoing trials there are different international collaborations such as the WHO SOLIDARITY trial, REMAP-CAP amongst others. There are also other trials underway regarding collaborative clinical research responses across the southern hemisphere like the Pan-African research group.

Brenda Wright (South Africa)

Independent Regional Monitor for Investigator lead clinical trials in Cape Town.
Project Manager and Clinical Conduct Course tutor

South Africa’s response to the pandemic: the 29th of January the emergency operation centre was issued. Training was delivered to HWs and protocols for hospitalised patients were created. The IPC subgroup is using evidence-based knowledge to advise the Ministry of Health. After the first case was confirmed, SA entered into lockdown which was held until early May. Now, the country is easing restrictions.

Even before the COVID-19 pandemic shortage of nurses was an existing problem in SA. With the additional burden, a call for nurses has been put in place, with a special focus on ITU trained nurses.
The following research points were highlighted:

- **Research GAP:**
  - *Are we currently protected against COVID-19 with the current prescribed PPE?*
  - *Are we using the prescribed equipment correctly?*

Even with IPC guidelines suggesting its use, the efficacy of currently prescribed PPE and its use is still confusing. There is a need for retrospective observational studies. Research could be invaluable in determining future actions to be taken to protect HWs.

- **Research progress:**

  SAFRA (South African Regulatory Body) is in current communication with WHO regarding development of potential treatments worldwide. The Body is also delivering online GCP courses and approving protocols for clinical trials, allowing submissions electronically to enable faster implementation of research.

  The National Institute of Communicable Disease, which advises the government and spearheads the testing for surveillance response has sequenced the full genome of SARS-Co-V2 in a local case.

  Furthermore, HIV laboratories were repurposed for COVID-19 research. Current ongoing research trials in South Africa include the **SOLIDARITY Trial**, research into the BCG vaccine to evaluate if immunity increases mortality, especially amongst front line workers and, finally, trials testing the accuracy of the currently deployed rapid test kits.

**Prof. Lonia Mwape** (Zambia)

*Director Nursing Services Ministry of Health.  
Dean School of Nursing, Levy Mwanawasa Medical University*

As of this workshop, Zambia’s response to the pandemic includes strengthening health systems by employing more HWs, intensifying surveillance with testing and screening. Regarding restrictions, these are being eased in some business areas while maintaining public health regulations and strategies being put in place to prevent transmission.

The following research points were highlighted:

- **Research GAP:**

  An observation was made that most research is focused on RCTs to investigate treatments, vaccines, and preventive measures and that the social/behavioural aspects of research are being neglected. Possible social science research areas could be assessing mental health impacts as well as exploring the community reactions and response to the outbreak.

- **Research progress:**

  The School of Nursing Sciences from the Levy Mwanawasa Medical University, has commissioned two research studies so far for which data collection was starting the week when this workshop was held:
  - Determine the levels of depression, anxiety and stress among Nurses and Midwives and explore their coping strategies.
  - Regarding stigma
- Disease related stigma if targeted at healthcare workers which can lead to mental distress and subsequent compromise in the quality of care being provided. Does stigma experienced by health care workers affect delivery of health care services?
- Does disease-associated stigma impede the control efforts of the spread of the disease?

Finally, Prof Lonia explained the creation of a call centre for nurses/midwives being set up in Zambia by The General Nursing Council to provide counselling services and accrue research data regarding the mental health status and impacts on healthcare workers.

**Summary of Q&A, open discussion and comments**

The workshop was recorded, and comments and questions captured. The following chart shows the themes that emerged.

![Themes Chart](image)

*Fig 2. Main themes for research priority within COVID-19 epidemic from workshop feedback review.*

Within these three themes it was then possible to categorise the questions, comments and discussions into these further sub-specific areas:
Fig. 3. Categorisation of questions, comments and discussions to sub-specific areas.
Regional/National responses to the pandemic:

All panellists explained the different measures taken in their own settings. The feasibility and applicability of transferring public health measures taken in HICs to resource limited settings was explored, with a special mention to WASH and social distancing. Furthermore, there was a discussion regarding the need for improving surveillance, and increasing point-of-care and enhancing diagnostic tests.

Regarding nurses and local response, the role of telemedicine/telenursing was discussed by one panellist. They also agreed on the need for continuous capacity building for nurses in the front-line.

Research gaps:

After detailing the ongoing research in their regions, panellists highlighted various research gaps which were also then recurrent and addressed during the Q&A section. Two main research gaps were identified.

1) Safety of health workers:

One participant asked the following: “If COVID-19 will affect these health care workers, what are the mitigation mechanisms that countries should pursue and are WHO and other partners working on this issue?”

On the one hand, the shortage of PPE, and accessibility of it, especially for nurses and midwives was highlighted. On the other hand, both panellists and attendees agree that there is lack of evidence on the use of these. One attendee suggested investigating the role of antibody tests as a method for screening and protecting health workers.

2) The role of Social Sciences:

Prof Mwape mentioned in her talk the lack of integration of social sciences in the research for COVID-19 and the need of these type of studies to address and support HWs, especially regarding their mental health but also with the stigma that many of them are suffering across different societies, countries and regions. After Prof Mwape mentioned this in her talk, many attendees questioned if there are similar studies in progress or planned with COVID-19, and with other patient groups in mind.

Similarly, such a question was raised for stigma at community level for those patients with febrile diseases. One attendee suggested a solution that could be tested and evaluated to help mitigate the impact of stigma in patients who have recovered from COVID-19: “[these patients could] receive a letter from the healthcare facility stating they have recovered? I think this would help these people from being stigmatised”

Finally, another participant suggested studying the role of student health workers during the pandemic.

The other theme explored during this workshop was regarding the research cycle

Attendees had questions regarding ‘how to publish COVID-19 research in the current scenario?’. These ranged from; regulatory approvals processes, the use of CE to involve research participants and dethrone conspiracy theories of research and COVID-19, to funding and engaging with governments and translating findings into policy.
Summary of Workshop
Consolidating feedback from the panellists and the questions and comments, we can conclude that this workshop particularly emphasised the need for:

- A solution to the shortage of the equipment for health workers required to deal with the COVID-19 pandemic
- Research studying the efficacy of the PPE being used
- Protection of, and support for, mental health status and impact of front-line nurses and other health care workers
- Careful and appropriate measures to prevent the stigmatisation of recovered COVID-19 patients
- A process to ensure governments use research to inform policy making
- Research into the possible role telemedicine could play

Call to action and next steps
If you are involved in research studying any of the above topics or are currently an African nurse working on COVID-19 wards, please get in touch and share any relevant protocols, experiences or advice.

Over the next few days please send in your comments and feedback on this workshop. Further virtual workshops are planned, which will be topic-specific and based on demand. If you would like us to conduct an open workshop related to a specific area of COVID-19 research, please let us know what aspects would be most helpful. We will also be running Working Groups on several different topics related to the COVID-19 pandemic for those with experience in research in the relevant areas. You can get in touch here: info@theglobalhealthnetwork.org’