

# DNPs Implementing and Sustaining Practice Change in Tanzania

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# Objectives

- By the end of this presentation the participant will be able to:
  - Identify how Kotter's 8 steps of change can be applied to DNP led practice change projects.
  - Discuss barriers to practice change projects in developing countries.
  - Identify strategies to improve sustainability of practice change projects.



# Purpose

- The American Association of College of Nurses (AACN) in their white paper recommend practice immersion experiences that afford the opportunity to apply, integrate and synthesize the DNP Essentials, provide opportunities for inter- and intra-professional collaboration, leadership and cultural competence (AACN, 2015)
- Improve provider's ability to manage diabetes mellitus II in rural Tanzania.



# Background

- Africa
  - 14 million people with diabetes
  - Expected to double by 2040
  - Previous emphasis on infectious disease
- Tanzania (East Africa, combined Tanganyika & Zanzibar)
  - More than 822,000 Tanzanian citizens diagnosed with diabetes in 2015, estimated 600,000 undiagnosed.
  - National prevalence of DM is 7.8%.
  - One of the three highest African prevalence rates.





# Implementation

- Needs assessment
- Obtain 2 glycosated hemoglobin monitoring devices
- Recruit team members for each Tanzanian hospital. Teams consisted of a DNP student leader and 2 BSN student members.
- Prior to travel-classes in beginning Swahili, A1c monitor education, contact with key stakeholders in Tanzania, team task division.
- In country-presentations and demonstrations for chief medical officer, physicians, clinical officers, nurses and lab personnel.
- Identification of company where supplies could be purchased
- Follow-up, follow-up, follow-up!!!



# Kotter's 8 Steps of Change

- Create a climate for change
  1. Create a Sense of Urgency
  2. Build a Guiding Coalition
  3. Form a Strategic Vision and Initiatives
- Engage and Enable the Organization
  4. Enlist a Volunteer Army
  5. Enable Action by Removing Barriers
  6. Generate Short Term Wins
- Implement and Sustain the Change
  7. Sustain Acceleration
  8. Institute Change



# Barriers/Challenges

- Communication
- Buy-in
- Logistical challenges-specimen transportation, lab space, high rate of anemia
- Gaps in resourcing
- Changing priorities
- Moving target of barriers
- Cultural differences
  - Kotters based on western ideals



# Strategies to Improve Sustainability

## DNP Program

Commitment of School of Nursing  
Faculty handoffs  
Student handoffs  
Financial feasibility

## Tanzania Agencies

Relationship building  
Identify one point person for accountability  
Frequent communication  
Community engagement  
Personalize change  
Involvement of women  
Flexibility





# References

- American Association of Colleges of Nursing. (2015). The Doctor of Nursing Practice: Current Issues and Clarifying Recommendations. Washington, DC: Retrieved from <http://www.aacnnursing.org/Portals/42/DNP/DNP-Implementation.pdf>.
- Bond, M & Knopp, A. (2018). Palliative care in northern Tanzania: doing a lot with a little. *International Journal of Palliative Care*, 24 (6), 296-303.
- Chiwanga, F., Njelekela, M., Diamond, M. et al (2016) Urban and rural prevalence of diabetes and prediabetes and risk factors associated with diabetes in Tanzania and Uganda. *Global Health Action*, 9.
- Mwangome, M., Geubbels, E., Klatser, P., & Dieleman, M. (2017). Perceptions on diabetes care provision among health providers in rural Tanzania: A qualitative study. *Health Policy and Planning*, 32 (3), 418-429.
- World Health Organization. Global Health Observatory Data (2012). <http://apps.who.int/gho/data/node.country.country-TZA>, Accessed June 29, 2018

