

Research A.N.T. Updates

The Research ANT continues to advance CNA's mission and promote nursing scholarship through monthly meetings and collaborative initiatives. Recent efforts include an examination of AI research and policies impacting nursing

and publication of an executive summary in Colorado Nurse entitled 'Ethical Concerns Regarding Integrating AI in Nursing Education'. Looking ahead, the Research ANT aims to continue expanding its initiatives and supporting the research and

evidence-based practice needs of nurses across the state. The Research A.N.T. meets on Zoom on the third Monday of each month at 10 am. Join us – no research experience needed! ■

An APRN's Mission Trip to Zambia

Justine Maedeker

I love being a nurse practitioner. I went to nursing school to learn to care for patients. When I went to nursing school, I actually learned about the art, science, ethics, and people within nursing; Carper's ways of knowing shaped my early nursing school experiences. I went to graduate school to expand my nursing skills, broaden my scope of practice, and take advantage of the many opportunities to learn. In the US, opportunities are everywhere, or so I thought.

In August 2024, I took a trip to Zambia with the organization, "Hope's Doorway". The mission of Hope's Doorway, founded in Durango, CO, is: "To give every child the opportunity to live in a safe environment with access to education, healthcare and enhanced life skills, for a sustainable future". By partnering with a local organization, Hope's Doorway ethically provides help to Zambian children to attend school by providing financial support and scholarships for children. There are currently three nurses and two community members on the board of Hope's Doorway.

The purpose of the trip that I attended was threefold. First, to check on the children the groups sponsor to attend primary and secondary school. In Zambia the government has begun paying school fees but families must pay for the children's shoes, uniform, books and supplies. In the rural areas, this is difficult when a pair of shoes costs twenty dollars and a bag of food costs 12 dollars. Financial

support is necessary for children to attend school. Second, Hope's Doorway wanted to encourage the women building small businesses who were sponsored in their Women's Empowerment Program. Third, Hope's Doorway hoped to observe a rural nursing clinic and to cultivate a relationship for potential partnerships with this rural clinic in Zambia.

The rural clinic visit was the most educational for me. The clinic was actually a rural nursing post. In Zambia, registered nurse (general) training includes three years of training after the 12th grade. Further specialization is available after registered nurse training. The rural clinic was run by three registered nurses. The nurses were supported by five government employees and this help was supplemented by volunteers. The volunteers were typically new graduate nurses who had yet to be assigned a post and wanted to develop their skills. I was honored to shadow a registered (general) nurse. In the short two days I was at the clinic, I observed the circumcision of a 30+ year old male, several prenatal visits, vaccination of infants with the oral polio vaccine, and a well-child clinic. The general nurse did a little of everything. I was disappointed that I missed 2 births that had happened during the night prior to my visit. The nurse brought the two babies into the world without the benefit of a hospital staff, or comfort of a birthing suite, but working at the top of his scope.

The lack of comfortable surroundings was a cause of concern for my spoiled American disposition, but the Zambian mothers did not have complaints. The clinic structure had been donated by a non-governmental organization (NGO). My first impression was that the staff had outgrown the clinic, and that everything could use a good dusting. The country was in a drought and dust seemed to be everywhere. The rural clinic entrance led to a hallway where vitals were taken. To the left was a room where patients were seen for consultation and provided with medication. The medications were stored in a small closet inside the room. Medical records were scattered over the single desk in the consult room. The cart next to the desk contained multidose vials of lidocaine. The rural clinic staff noted that they had supply deliveries about every three months. When we arrived they had stocked antibiotics, Tylenol (paracetamol), and oral rehydration solution (ORS). The staff noted that they were nearly out of nifedipine (used for high blood pressure). To the right of the entry hallway was the HIV testing room and the room for receipt of antiretroviral therapy. On the floor, within the therapy room was a single yellow box-like object, which turned out to be the autoclave used to clean instruments.

Behind the clinic, was a second building, the maternity ward. The entrance to the maternity ward was a large room that