

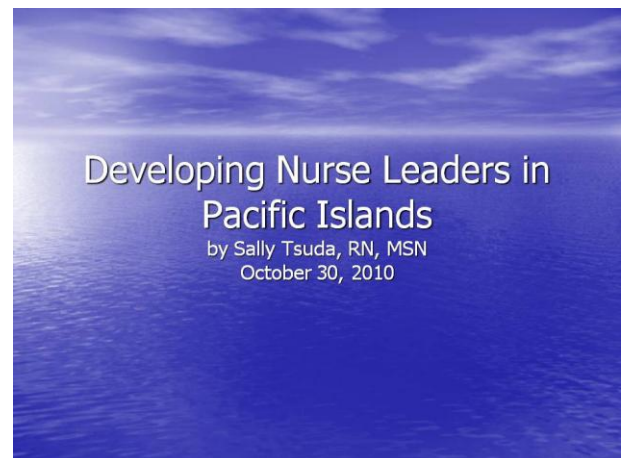
# Developing Nurse Leaders in Pacific Islands

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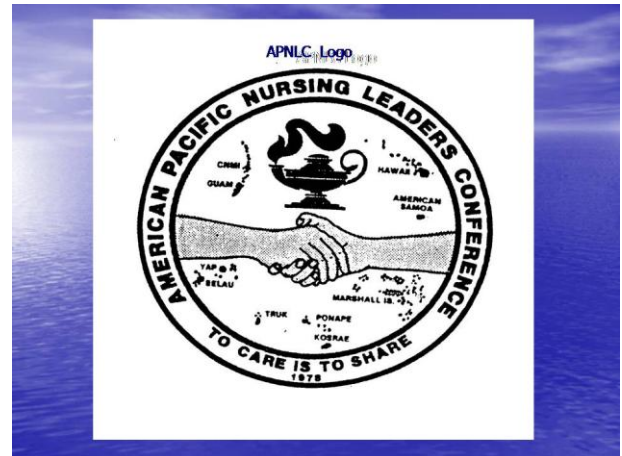
Greetings from Pacific island nurses. *Alii* is the greeting from Palau. *Aloha*, maybe you all know that. *Hafa Adai* is the Commonwealth of Northern Marianas Islands and Guam. *Kaselehlie* is from Pohnpei. *Lenwo* is Kosrae. *Mogethin* is Yap island. *Ran Annim* is Chuuk. *Talofa* is American Samoa. And *Yokwe* is from the Marshall islands. And maybe I should say *Haisai*?

The American Pacific Nursing Leaders Council is an organization that includes these islands. Palau is this one here. Yap is the one in black. Yap, Chuuk, Pohnpei and Kosrae are islands that belong to the Federated States of Micronesia. The red is Guam, and blue is the Commonwealth of Northern Marianas Islands. The maroon is the Marshall Islands. The pink is American Samoa. And Hawaii is; where is Hawaii; it's yellow? Okay. As you can see, the islands of the American Pacific Nurse Leaders Council span right across the Pacific Ocean. Closest is Palau to Okinawa. And all the way across is American Samoa and to the North is Hawaii. That alone will give you an idea of what the problems and the barriers we face as we deal with how to develop nursing leaders in the Pacific islands. And these are all associated with the



United States.

The American Pacific Nursing Leaders Council first had an organization meeting in 1978. At that time, we called it a conference because we had no idea whether it would survive or not. And as we met year after year, we gradually decided maybe we can do it. Maybe we know what we are doing. So we changed the name to “council.”



The American Pacific Nursing Leaders Council went through a lot of growing pain, and we discussed what we are here for and what we are trying to do. And we did come to the conclusion that we were trying to achieve professional unity in diversity. As you remember that the islands going right across the Pacific Ocean, we are individual island nations with individual cultures and many languages. We had some specific ideas as to what we wanted from this organization. We believed that no one jurisdiction was considered more important than another. We also believed that the various cultures represented in APNLC were to be respected and shown consideration in all of our deliberations. We decided that all nurses practicing in the APNLC are considered to be members; and that each nurse, each individual has the potential to be a nurse leader. And

AMERICAN PACIFIC NURSING LEADERS COUNCIL

*Professional Unity in Diversity*

- No one jurisdiction was considered more important than another.
- The various cultures represented in APNLC were to be respected and shown consideration in its deliberations.
- All nurses practicing in the APNLC jurisdictions are considered members; each individual nurse is viewed as having the potential to develop leadership skills.
- Group consensus is the common method for decision making however no member jurisdiction is pressured to adopt an unacceptable decision or strategy.

we decided that group consensus would be the common method for decision making. However, no member jurisdiction would be pressured to adopt an unacceptable decision or strategy. If you notice, we are trying to be structured, but very loose to allow individual variation.

APNLC Purposes

- Provide communication mechanism;
- Discuss nursing problems in islands;
- Examine solutions for identified problems;
- Explore educational needs of nurses in our islands;
- Share expertise of nurse members.

What were the purposes? We wanted to provide a mechanism for communication. Because the islands were scattered throughout the Pacific, we needed to feel bonded. We needed to feel that we were together because if you were in an island, you are islanders and you are all alone, it's scary. So this way, we wanted to feel that we were pretty strong. We wanted to discuss nursing problems in the islands because we knew island nursing was different. We wanted to examine solutions for identified

problems; not necessarily that we could solve everything, but at least we could get a better understanding of what we were dealing with. We wanted to explore educational needs of nurses in our islands because we were suffering from nursing shortage like many other places. And we wanted to share the expertise of nurse members. In other words, we believe that there were nurses within our



jurisdictions that had knowledge and skill that could be shared with other jurisdictions.

Let me just explain a little bit about the origination of these islands which are called United States Affiliated Pacific islands. That is the phrase we use today. After World War II, the United Nations said "the US, you take care of these islands," so the islands were then called trust territories of the Pacific islands. It was placed under the department of interior specifically for strategic purposes because they wanted to make sure that the United States had the means to protect Hawaii which was hit by the Pearl Harbor, was struck by the Japanese, and that was just a stepping stone to the United States. The Trust Territories of the Pacific Islands existed as a colony of the United States. Towards the end of the late 70's, the United Nations said "Enough of this colonization" "We are not having colonies in the world" and "We want to minimize that." So, negotiations were ongoing with these islands. Today we have what is called "flag territories" which are the Commonwealth of Northern Mariana Islands, territories of Guam and territories of American Samoa. These are called flag territories because supposedly they fly the American flag. The other islands were called Freely Associated States of Micronesia or another phrase is Compacts of Free Association. This political negotiation, the strategy, was for allowing these other islands to become more independent again. Freely Associated States of Micronesia included Palau, Republic of Marshall Islands, and the Federated States of Micronesia which are Chuuk, Kosrae, Pohnpei and Yap. Palau finalized its political status in 1994. The others completed their status in 1984. So if you think about the length of time that these islands nations have existed (it was very short), it was not enough time to really develop and be self sufficient, and so it is a growing problem.

Before I go to the "Diverse Island Characteristics," I just want to mention that when you have developing island nations (in mind), you always have to think about economy, the politicians, the educational system and the health care system. Economy will dictate how much money you have to fix your sewer system and power, and to provide your health care facilities. The politicians are



important in that they make the laws and they oversee what happens to the money that comes in. Education is important because the thinkers, the people who think and make decision for your island have to be well educated. Otherwise we are all in trouble. Maybe one of our problems right now is that we do not have enough educated politicians. And the health care system; you need to have healthy people in order to be able to think and be the politicians and make the economy function. So these are very important aspects of an island nation as it develops.

“Diverse Island Characteristics,” these are information that was gathered around 2000. We do not have the latest 2010 information. Approximately 500,000 people live in all of the

islands excluding Hawaii. The CNMI has a characteristic of being heavily populated by foreigners. I am told that in 2011, this is going to change because they are not evicted, but they are asked to leave the island. 39% in Palau and 2% in FSM (are foreigners). This is just to give you an idea of the diverse characteristics of the different islands. Population density; Yap has a small population in terms of the land space; 243/sq mile as compared to Majuro which has 6,300 people per sq mile. The population is quite heavy for the land space. There is an island called Ebeye, which is the part of Marshalls and sits right off of Kwajalein. Kwajalein is an air base of the United States where the missiles are tested; they are tested on the remote islands in the Marshalls. On this little island Ebeye, it took me 5 minutes to walk across the narrow part of the island. It took me about 15 minutes to walk from one end to the other. The island is very small, but it is wall to wall people, wall to wall houses. So, its population density is calculated as 66,750 per sq mile. If you can just imagine, people, people, people. So, it is very diverse in terms of one island to another. Basically, the islands still have subsistence lifestyle with exception of Guam, and to some extent Palau and maybe a CNMI. Subsistence lifestyle means they just produce enough to live.

I will show you some pictures later; so that you do not think all of the Micronesia is so poor or so unpleasant, okay?

The islands are serviced by Air Micronesia which provides air transportation, coming from Guam. Guam is served as a hub of Air Micronesia which comes through Honolulu. Air Micronesia flies and

## Diverse Island Characteristics

- Approximately 500,000 population in islands;
- CNMI – 56% foreign nationals, 39% in Palau, 2% in FSM;
- Population density: 243/sq mile in Yap, 730/sq mile on Guam, 6,300/sq mile in Majuro vs. 66,750 sq mile in Ebeye;
- Subsistence lifestyle (exceptions - Guam & to some extent Palau);

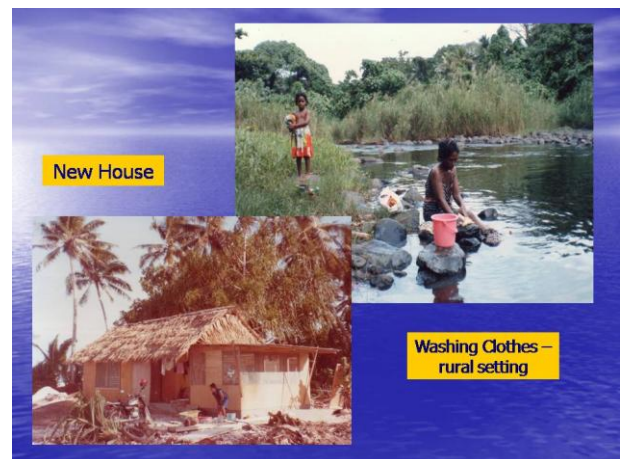
- Air Micronesia provides service to Guam, Palau, FSM and Marshalls; Hawaiian Air flies 2x/week to American Samoa; a private airline has daily flights from Guam to Saipan (CNMI);
- Multicultural populations with over 12 languages including different dialects;
- English serves as the common language however it is a second language for many islanders and is a barrier towards attaining higher education.

services Chuuk, Pohnpei, Kosrae going up to the Marshals and up to Hawaii. Usually there is a daily flight. I recall that the island Harper, the flight from Honolulu to Guam, is daily. The flight from Guam to Palau is daily, but it does not stop on the Yap Island all the time. So the air transportation can be inadequate to service the people. In the old days, the Air Micronesia was not able to land on the islands because the runway was so short, so that you always felt that you are going to dip right over into the ocean. Later on, as the United States decided that we should have 747s land on each island to help improve island living, they had capital improvement projects on every single island to provide adequate landing space. But if you can imagine, when you bring in more airplanes, with more people, more tourists, more foreigners coming in, what happens to the island lifestyle? Keep that in mind when you think about the nurses.



Pohnpeiian children at play

A Yapese girl



New House

Washing Clothes – rural setting

We have multicultural populations with over 12 languages including different dialects. Supposedly, English is to be the common language. However, English usually is a second language, so the people have difficulty mastering English in the school system, which means they would have difficulty in college; reading book and preparing for advanced occupations.

These pictures give you an introduction to people and the lifestyle (in the Pacific islands). These are Pohnpeiian children at play, usually on the roads because of limited park space. Sometimes, they do not have power, then there is no washing machine, so that they might wash their cloth using a hose or the river. If you notice in the background, they are drying their cloth on the bushes. The other picture is a little Yapese girl. She is getting ready to perform in some kind of cultural event.

This is just a picture of a new house being built with a thatched roof and plyboard walls. And another picture is a mother washing her cloth in the stream. Usually, you would see that out in the rural areas; they do not have laundry mat (laundromat) and those kinds of things.

These are shots of rural; pig's on the road and puddles.

This is a new Capitol building in Palau. Looks very impressive, right?



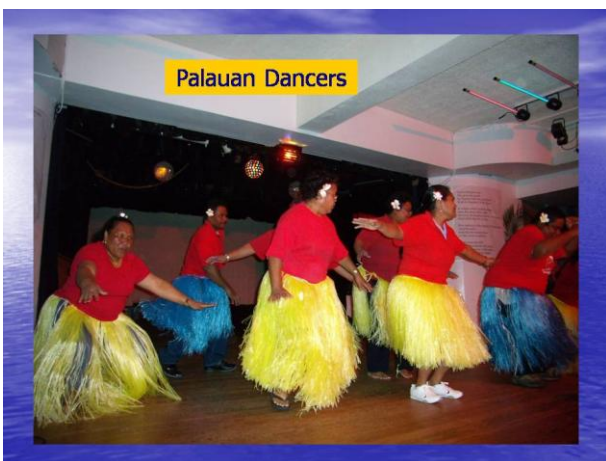
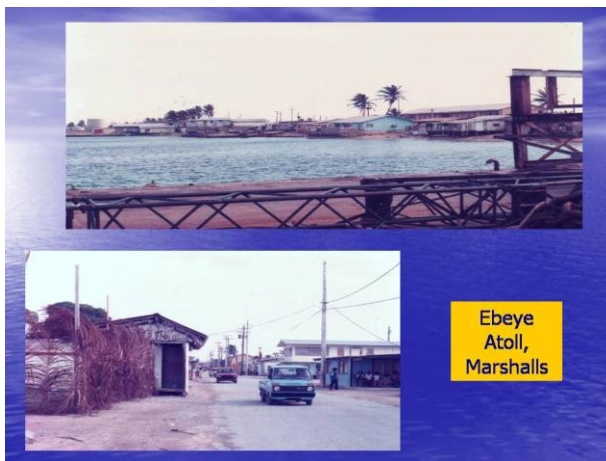
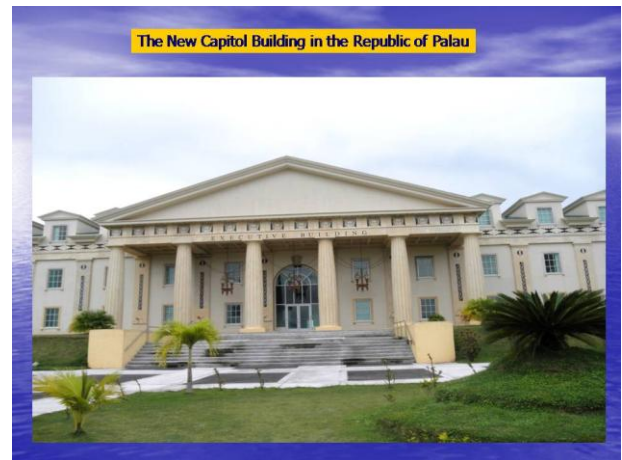
This is Ebeye; wall to wall houses.

Cultural Diversity; this is a Yapese boy and an outer island Carolinian dancer, but they belong to a Yap state.

They are Palauan dancers.

Health Related Issues and Problems are deteriorating facilities, lack of equipment and maintenance, lack of adequate support services, and nursing shortages.

This is a shot of the Chuuk State Hospital. I think it was built in 1975. Puddles.



- Health Related Issues and Problems
- Deteriorating facilities;
  - Lack of equipment maintenance;
  - Lack of adequate support services – x-ray, laboratory, pharmacy;
  - Staff shortages requiring off-island contract hires – doctors, nurses, dentists, dietitians, etc.



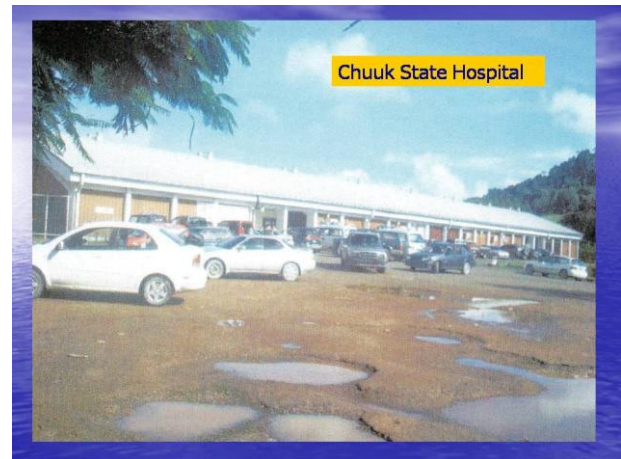
This is a hospital dump site. They do not have adequate disposal.

Some of the Common Health Conditions and Disorders in the US Affiliated Pacific Islands. Disorders of developing countries still exist, such as dengue fever, cholera and Hansen's disease. In the report at the last conference, Chuuk state had to open up a unit with 12 patients that had multiple drug resistant TB. This is the major problem that has emerged, and they are trying to figure a way to control the TB situation. Previously, they had what was called DOT (Direct Observation Treatment) where patients would come into the clinic and a nurse would physically give them the pill to take. That was the only way that they could get compliance; so the compliance becomes in a problem.

Disorder of a Western, modern world: cancer, strokes, heart attacks and diabetes. So the islands are dealing with two types or two phases of health conditions, of the old world and the new world. On top of that, they have some societal mal-adaptation problems such as smoking, alcohol abuse – specifically binge drinking; they drink drink drink until they pass out – suicide especially in teenagers, and the STDs.

Developing Nurse Leaders in the US Affiliated Pacific Islands. When we ask the nurses “What are main things that are serving as a barrier for you to do your work in the way you want to?” they say “Nursing shortage, low salaries, and they do not have opportunities to prepare themselves better.”

We looked at the whole situation, we thought there is something else, more basic to low salaries



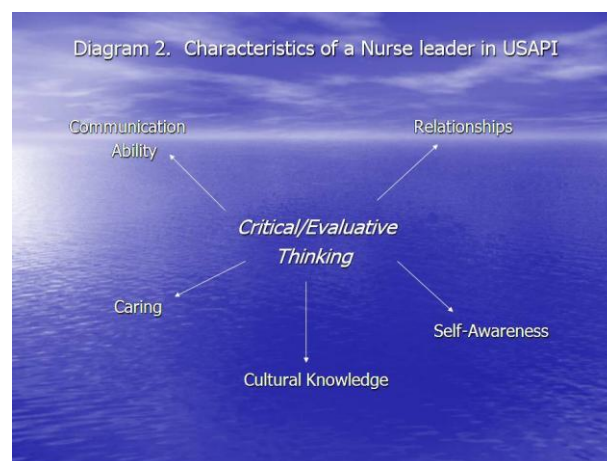
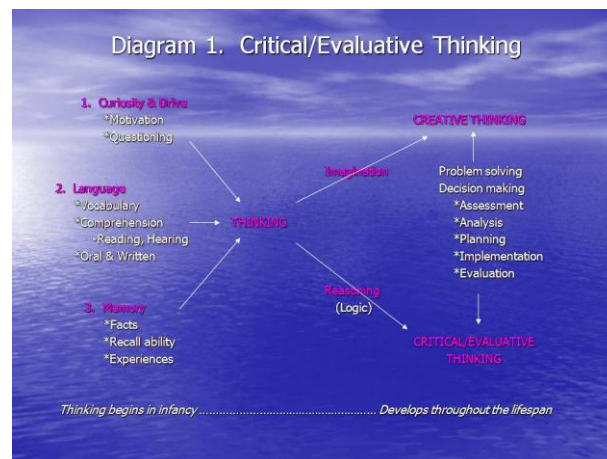
### USAPI: Common Health Conditions and Disorders

- Disorders of developing countries such as: cholera, dengue fever, Hansen's disease (leprosy), measles, T.B., typhoid fever, malnutrition, upper respiratory infections;
- Disorders of a westernized ("modern" world) such as: cancer, strokes, heart attacks, diabetes, pneumonia;
- Societal maladaptation such as: smoking, alcohol abuse (binge drinking), suicide especially in teenagers, sexually transmitted diseases, i.e., Chlamydia, gonorrhea, syphilis.

### Developing Nurse Leaders in the USAPI

- Barriers to developing nurse leaders: nursing shortage, low salaries, lack of staff development opportunities (1979).
- Develop CRITICAL/EVALUATIVE THINKING – defined as *the use of thought to make reasonable judgments and serve as the basis for decision making, taking action, and evaluating the outcomes of the actions taken.*

and nursing shortage. We, being some of the leaders of APNLC, decided that maybe we should focus in critical thinking. If you think about it, we cannot depend on the resources because we are always running short of money. We do not have enough drugs. We do not have enough equipment, or the equipment is always broken. The only one resource that we could really work with, that we knew was there, was the individual nurse. The human being became the most reliable resource that we had in the islands, so we wanted to develop the nurse who could think because they are always faced with crises. Typhoon comes, and you are out of running water and power; then what are you going to do? You do not have enough money; what are you going to do? Your nurses do not come to work because the husbands did not drive them to work, whatever the cultural reasons; what are you going to do? You are the head nurse; you are the chief nurse. So we wanted to focus in on the critical thinking.



This is just a diagram of critical thinking in which I am proposing that critical thinking begins in infancy. How can little babies start to think or how can babies know when they are hungry and that their diapers are wet? “I cry, and mama is going to come and change my diaper or feed me.” They will begin to think, and the more we follow through on the thinking process, and as they grow older and older, we can help them to develop critical thinking, creative thinking. Those of you who are nursing students know your teachers are always saying “Use the nursing process” “We want you to assess” “We want you to analyze” “Come up with decisions” “Evaluate whether what you did worked or did not work;” these are what we wanted our nurses to do more at the skillful level.

Characteristics of the Nurse Leader in the US Affiliated Pacific Islands; obviously, we want them to have nursing knowledge, but there are certain kinds of ability that make the nurses in the island more successful, more adaptable. They need to be able to communicate with their people, with their politicians, with their subordinates, with their superiors, so that they can work together as a team. Relationships are important because the island is so small, everybody is related to everybody, everybody knows who is fooling around with who, and all that kind of stuff. So relationships become



very important in maintaining a professional level.

Caring; nurses need to understand what is caring, what it means to care about somebody else and to give care or give nursing care, so that the other person feels I am important, I can learn, and I can take care of myself.

Cultural knowledge becomes very important in our Pacific islands because it is so diverse. You need

to know a little bit about the other culture. If I went on into a Yap state, I cannot just touch a male because it is a “no no,” so you have to find a male nurse to take care of this patient. Male nurses cannot go into a Chuuk state and help with delivery because that is not acceptable. You need to know the culture of what is possible and what is not possible.

Self-Awareness; you need to know what my strengths and weaknesses are, and how I can be more effective;

What did we do in the organization? We looked for those activities that could force nurses to do critical thinking. Each year, we have an annual conference. Each year, a different jurisdiction serves as a host. We have 10 jurisdictions, so that once in every 10 years, an island nation has to put on the conference. In order to put on the conference for anywhere from 90 to 100 people, coming onto your island, you have to plan, you have to find money, you’ve got go to talk to your politicians, and you’ve got go to the banks and businesses and negotiate “Can you help us?” It becomes a very big thinking project, and many nurses are involved. The one thing that has evolved out of this experience is that the people in a community recognize what nurses are doing. They like to see other nurses coming to their islands to learn about how to be better nurses. The businesses love the nurses and their conference because they bring in money. They rent the hotel rooms and eat the food, so that the economy gets a little burst from having a conference. It becomes an island event.

As it’s mentioned before, we have cultural night. The cultural night is a big thing. Every jurisdiction tries to out-do the other jurisdiction. It is a competition in dancing, singing and whatever. Dignitaries are invited every time, so that they can see that the nurses can have fun as well as work. We also had the nurses who give jurisdiction report. For example, a nurse from say Palau would have to get up and talk to a group of people. In order to get up and talk, you have to know what to talk about, right? That means they have to think in order to write their speech. And they have to get an approval from the chief nurse or the director of nursing, so they have to negotiate what they shall put in their reports.

Another way we push them to do critical thinking is to work in groups. If we identify the problem,



we have them work in groups and committees, and change the by-laws. These are some of the activities we did to push them into doing critical thinking.

Once a year conference was not enough. We believed that that was not enough to promote critical thinking, so we launched into continuing education, and sorted funds to bring key people to different islands; every year, to conduct continuing education courses. The courses were designed just like your nursing school objectives that were presented. The courses were designed to promote critical thinking. We would use cases from within the jurisdiction in the hospital and in public health. We would use those cases as the focus of the study, and we look at what are the cultural factors, what are the resources you have, is this appropriate for your island, and that was a mechanism for making it relevant to the jurisdiction as well as to get them to think.

This is a continuing education by a local health educator talking about local medicine. After that kind of topic, then we discuss how you handle the patient who is using local medicine versus your Western medicine. Is that good or is that bad? And remember there are number of American doctors within the island who believe only Western medicine is the good medicine. So it becomes an education for everybody.

And we also share expertise from outside of membership.

Please remember that in our efforts to promote leadership of nurses, we could not pay attention to 100 nurses to be leaders. It is impossible to find 100 nurses, so we have to depend on the chief nurses and the directors of nurses to look at the nursing pool in their own jurisdiction. They say “Okay I think we should use so and so, and I would send her to the APNLC conference or there is a WHO workshop, and I want her to go.” We began to select the potential nurse leaders for the future. Each jurisdiction did that. They did it automatically; the chief nurses and directors use their judgment to





select who should be groomed. If you had two or three in your jurisdiction, that was even better. We began to train our nurses; one nurse at a time. We knew that we could not train 50 nurses all at once.

I think that ends what I needed to share with you.

So “IPPEE NIFEE DEBIRU.”

