24th World Nursing and Healthcare Conference

September 13-15, 2018 | Copenhagen, Denmark



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The power of international experience exchange programs - developing partnerships that positively impact communities

Charing best practices for the improvement of patient care services is a long standing practice in healthcare. The application of this Omodel internationally has the potential to result in powerful and long lasting effects. This model has been applied with success to the Experience Exchange Program offered by the Global Alliance for Health. This program brings together partners from across the globe to share challenges as well as best practices in an effort to address issues related to child abuse, sexual assault and gender based violence. The sexual assault and exploitation of children is an international phenomenon. However, in third world countries, children are at a significantly higher risk of exploitation due to poverty, illiteracy and inherent power dynamics. In Africa as an example, cultural realities such as child marriage, the vulnerability of AIDS orphans, and in some areas the cultural belief that HIV infection can be cured by having sex with a child, also known as the "virgin cleansing myth" all lead to intensifying the potential abuse and exploitation of the most vulnerable members of the population. Currently, Zambia is an international leader in the incidence of pediatric AIDS orphans, with current statistics of more than 85,000 children living with HIV and another 380,000 orphaned due to the disease. In a country where 1.2 million citizens are affected by HIV, children compete for resources and are in need of effective strategies to meet their needs. The multidisciplinary response to sexual assault, which is the hallmark of coordinated sexual assault response teams (SART), is a model that has demonstrated success in the US and has applicability to other countries. In many third world countries, even when assaults are reported, the lack of trained forensic examiners, coordinated police investigations and legal interpretation of evidence, only results in less than 10% of cases resulting in successful prosecution and conviction. Sharing best practices from the United States and other world partners utilizing strong multidisciplinary response systems, will insure that there is a shared understanding of the minimum level of services required to protect victims of child abuse and gender based violence in a manner that insures justice in any world court of law.

Biography

Dr. Nicole M. Barnett, RN, Chair of the Board and offers a comprehensive background in biomedical research, education and nursing. She completed her nursing training at Contra Costa College in 1994. She is also an alumna of Oberlin College in Oberlin Ohio, and California State University Dominguez Hills where she earned her BSN and MBA. In August 2005, she earned her doctorate in health sciences from the Nova Southeastern University College of Allied Health and Nursing. Dr. Barnett is also a state certified public health nurse (PHN) and in 2012 achieved her certification as a Clinical Nurse Leader from the American Association of Colleges of Nursing (AACN).

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