

**EDITORIAL**

# Networking for local and global change: The Southeast and East Asian Nursing Education and Research Network

With the publication of “Working Together for Health: The World Health Report 2006”, the World Health Organization made the global health professional shortage an institutional priority (Chen et al., 2006). More than 10 years later, the health workforce remains a pressing issue and has been prioritized in the 2030 Agenda for Sustainable Development (UN General Assembly, 2015). Several issues affect the workforce shortage: migration, ethical recruitment, increasing both production and retention, as well as turnover. Given that nurses comprise the majority of health professionals (World Health Organization, 2017), effectively addressing the nursing shortage will go a long way toward tackling the overall health workforce shortage and making progress toward the Sustainable Development Goals.

“Network” is extensively used in health care to explain relationships within the sector and with outside organizations; its use is often synonymous with words, such as partnership, collaboration, alliance, and group (Cunningham et al., 2012). The United Nations Development Fund defines capacity as the “ability of individuals, institutions, and societies to perform functions, solve problems, and set and achieve objectives in a sustainable manner” (2010, p. 2). Networking among nurses and other health professionals has been linked to improvements in patient care through shared knowledge and improved communication (Khanum et al., 2016). Likewise, professional networks might be one strategy for building capacity among nurses and other health professionals, as they can help promote the sustainable sharing of knowledge and the development of skills.

Leading a diverse group requires sensitive and inclusive leadership, as well as an appreciation of the needs and concerns of stakeholders. In this Editorial, we describe the formation and the critical success factors for establishing a multi-national health/leadership network, namely the Southeast and East Asian Nursing Education and Research Network (SEANERN). We also try to illustrate how a regional academic nursing network can affect change locally while contributing to priority global health issues.

## 1 | BACKGROUND

The Association of Southeast Asian Nations, or ASEAN, an economic union of 10 countries – Brunei, Cambodia, Indonesia, Laos, Malaysia, Myanmar, the Philippines, Singapore, Thailand, and Vietnam – is in a unique position to address the nursing shortage. In 2006, ASEAN

countries signed several Mutual Recognition Arrangements (MRA) to strengthen the region through the free flow of goods and services in eight areas, which included nursing. The aim of the MRA was to improve production and enable better distribution of services. The SEANERN was created in 2015 by the Chiang Mai University Faculty of Nursing to promote cooperation and collaboration among academic nursing institutions in the ASEAN +3 (including China, Japan, and South Korea). One of the objectives of SEANERN is to better understand how the ASEAN MRA on nursing services is affecting the region, and to actively promote academic inquiry into the implications of regional nursing migration and nursing education and research.

For decades, the Chiang Mai University (CMU) Faculty of Nursing has been a resource for the region and has worked with the Thai Government and United Nations agencies to build capacity in nursing and midwifery in Asia, Africa, South America, and Oceania. Later, overseas governments and funders, including the China Medical Board, approached the Faculty of Nursing for technical assistance. These collaborations have included the successful Program of Higher Nursing Education Development (POHNED) which upgraded the credentials of nurse educators in China. POHNED graduates are now nursing leaders in China, serving as deans, high-level administrators, and government officials. This was recently followed by the Strengthening Nursing Education in Three Southeast Asian Countries Program, which hoped to replicate the success of POHNED by training masters-level nursing faculty in Laos, Myanmar, and Vietnam.

The development- and capacity-building work that the Faculty of Nursing at CMU engaged in over the years allowed the Faculty to develop a huge network of contacts throughout the world. Because of its reputation and its connections, the Faculty of Nursing was encouraged by the China Medical Board to create SEANERN on the eve of the founding of the ASEAN Economic Community in 2015. Ultimately, the formation of SEANERN was made possible through funding from the China Medical Board, a network of contacts or the ability to make contacts in the ASEAN+3, relationships with and access to regional experts for SEANERN capacity-building workshops, and a strong international relations office at the Faculty of Nursing, which provides overall coordination.

In 2015, when SEANERN began, the network was a group of nursing education leaders in the ASEAN+3 with little connection to one another, save for their relationship with the Faculty of Nursing. Three years later, the network is a close-knit group of colleagues and

collaborators who routinely reach out to one another, both to continue to research the effect of the MRA on the region and for other projects as well. Some of the most notable achievements of SEANERN thus far include:

- Participation in or hosting of international conferences hosted by SEANERN members in China, Hong Kong, and Thailand
- Initiation of the “One Belt, One Road” study on building capacity for primary health-care providers in ASEAN+3, led by colleagues at the Fudan University School of Nursing in coordination with the CMU Faculty of Nursing, and funded by the China-UK Global Health Support Programme
- Increased collaboration between network members to develop manuscripts and publications on both SEANERN-related and projects relating to nursing leadership and research
- Student exchange programs between SEANERN member schools
- Capacity building for SEANERN members; resource persons, as well as other members of SEANERN, have served as external examiners for students and for fledgling degree programs
- A workshop for SEANERN institutions organized by the University of Hong Kong to take place in December 2018

## 2 | KEY SUCCESS FACTORS AND CHALLENGES

SEANERN is an example of how nurses and nursing institutions can successfully come together to respond to political and societal change. Proactive networks, such as SEANERN, allow nurses to effect change in addition to be affected by it. We hope that nursing professionals and institutions in other parts of the world will be inspired by SEANERN's example to form their own networks and to advocate for their own regions. Listed below are the key success factors and challenges encountered by SEANERN.

### 2.1 | Success factors

#### 2.1.1 | Building from existing networks

The Faculty of Nursing at CMU cultivated members for SEANERN from a network developed over years of working with different agencies, institutions, and governments. This network included alums from our masters and doctoral programs.

#### 2.1.2 | Soliciting equal input and expressing appreciation

Information and feedback are routinely solicited from members, and all members are expected to share their experiences and opinions to ensure that the collective voices of the group are represented. The Faculty of Nursing shows appreciation for everyone's contribution through providing a warm welcome at meetings along with small tokens of appreciation. This is especially important as all members are contributing their time to attend 2–3 day meetings and continue to contribute their time when they return to their home countries.

#### 2.1.3 | Inclusive agenda focusing on member needs

The annual meetings feature issues suggested by the members, as well as 1–2 capacity building workshops based on the expressed needs of the members. Many members are in the process of developing/upgrading their degree programs. As such, several workshops focused on nursing education curriculum development were held.

#### 2.1.4 | Resources

Funding from the China Medical Board allowed members to attend meetings at no cost to themselves or their employers. The funding also included travel costs for issue experts and overheads. Equally important was having a designated team to coordinate, communicate, and routinely follow up with members and to streamline planning and running of each meeting. Optimally, this team would take responsibility for the coordination and follow up over the course of the project to allow continuity.

#### 2.1.5 | Opportunities for bonding

While funding and contacts were required to make SEANERN a reality, the real element that allowed SEANERN to flourish was time. Facilitating regular meetings for the same group of professionals over a short period of time allowed the group to form close bonds, and allowed collaborations to blossom naturally. The last meeting was held on campus at the Faculty of Nursing, CMU, which allowed members to spend time together both in and out of meetings, and allowed for a strong sense of comradeship to develop.

### 2.2 | Challenges

#### 2.2.1 | Sustainability

SEANERN would not have been possible without the China Medical Board, and in order for SEANERN to continue to be effective, the network must have funding to pay for airfares, meeting expenses, speakers, and overheads, and the SEANERN Secretariat must have a sufficient staff for coordination. While SEANERN members have been extraordinarily generous with their time, the reality is that all members have full-time jobs, and their work with SEANERN is an added responsibility taken on top of their already overflowing workloads.

## 3 | THE FUTURE

Moving forward, SEANERN will focus on advocating for health equity. Ensuring an adequate workforce to meet the health needs of the population is just the first step in ensuring health equity for the population. Malaysia, Singapore, and Thailand all offer universal health coverage with other ASEAN countries at varying stages of advancement toward universal health coverage (Van Minh et al., 2014). By using the resources at hand, such as the MRA on nursing services, a common goal to improve nursing throughout the region, and the desire to present a strong united economy through the ASEAN Economic Community, nurses can both address the recognized need of nursing services and promote health equity for the betterment of society. These efforts can help highlight the importance of health equity on a global scale.


It will be hard to quantify outcomes from these networks over a short period of time, but long term, these relationships and connections will bear fruit, just as the Faculty of Nursing's wealth of connections developed over the years have helped to create SEANERN.

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#### ORCID

Marisa Guptarak  <https://orcid.org/0000-0001-9330-9602>

Wipada Kunaviktikul PhD, RN, FAAN Chair, SEANERN  
Marisa Guptarak MPH International Coordinator   
Faculty of Nursing, Chiang Mai University, Chiang Mai, Thailand

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