### Nursing in the Humanitarian World and

Nursing Care for War Injuries

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#### Who We Are



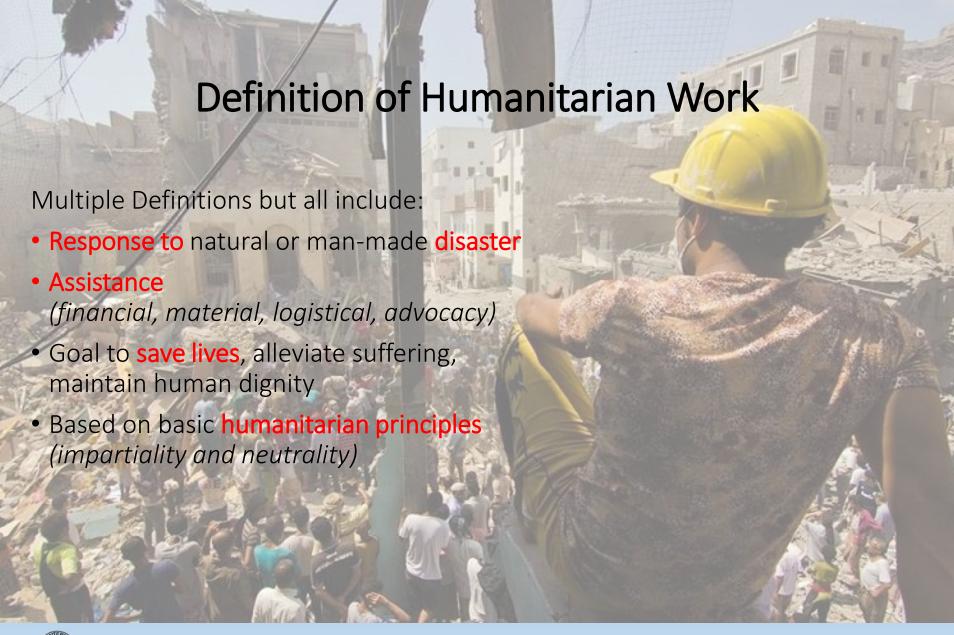
- MHA, MN focus on care system
- 40 years Nursing Career
- 14 years Humanitarian World
- Mix emergency and development



- 15 years ICRC teaching and hospital management
- Mix of emergency response and development of nursing training programs in humanitarian settings











#### Impact of Nursing on the Humanitarian World

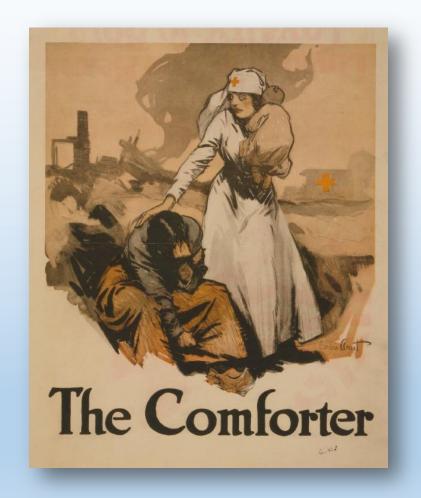
Nurses and Midwives are responsible for 80% of the world's health care delivery

(Nightingale Declaration Statement)

- Global Nursing Shortage (WHO)
- Especially prevalent in developing countries
  - Economic implications
  - Human Resource implications
- Unfairly distributed resources



- Insufficient nursing staff
- Lack of health care
- Poor quality of care







#### Importance of Humanitarian Nurses





ICRC is an independent, neutral organization ensuring humanitarian protection and assistance for victims of armed conflict and OSV, responding to emergencies, at the same time promoting respect for IHL and Geneva Conventions





#### ICRC Specialized Nursing in Humanitarian World

- ICRC long history working in conflict situations
- Specialization in nursing care of WW patients
- Partnership with in-country health authorities and structures to develop training and knowledge
- Crisis and developmental Guidelines for WW Nursing Care

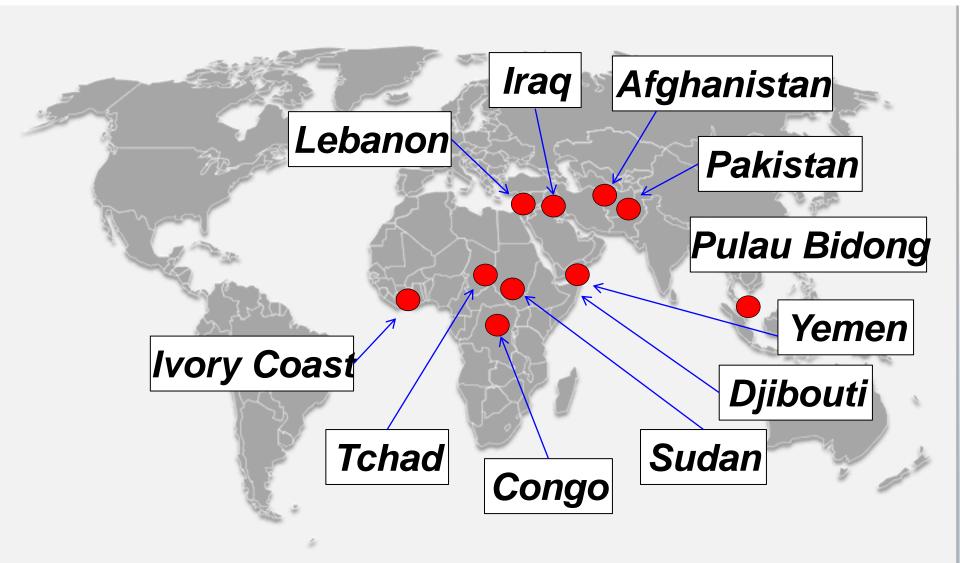






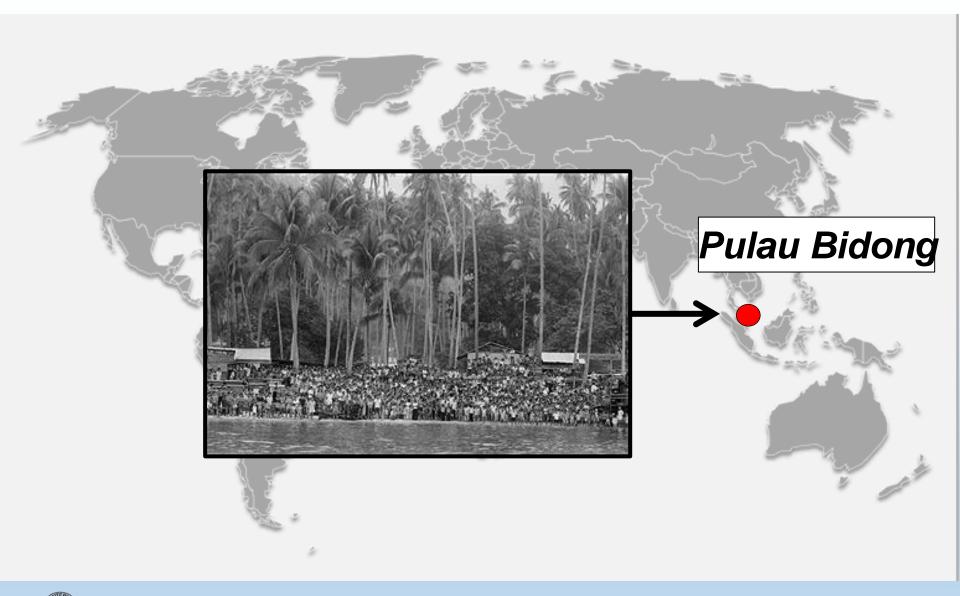












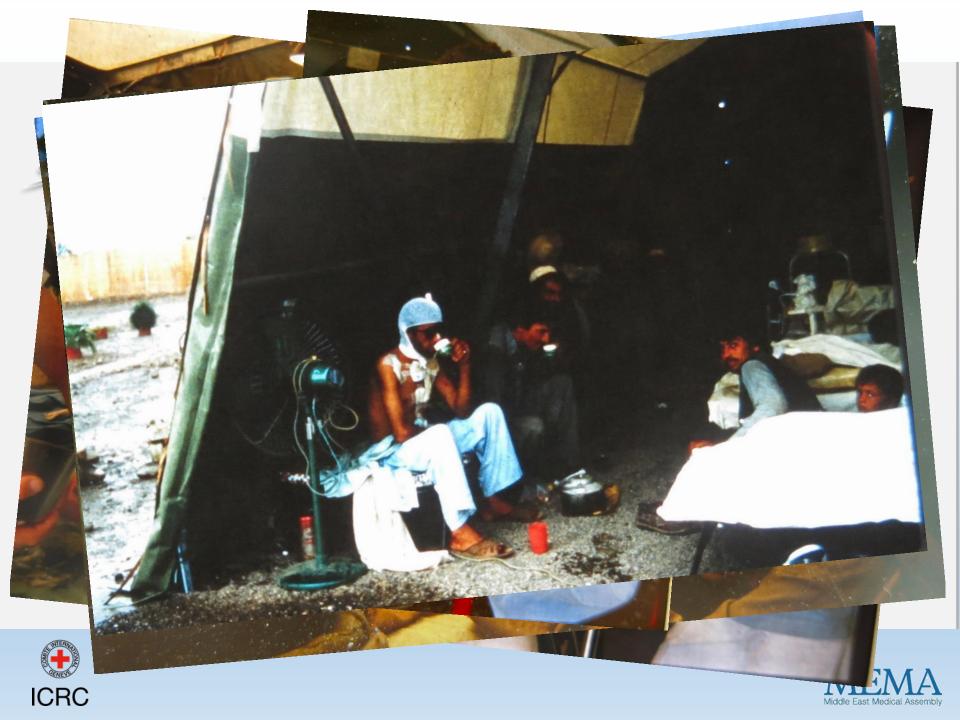








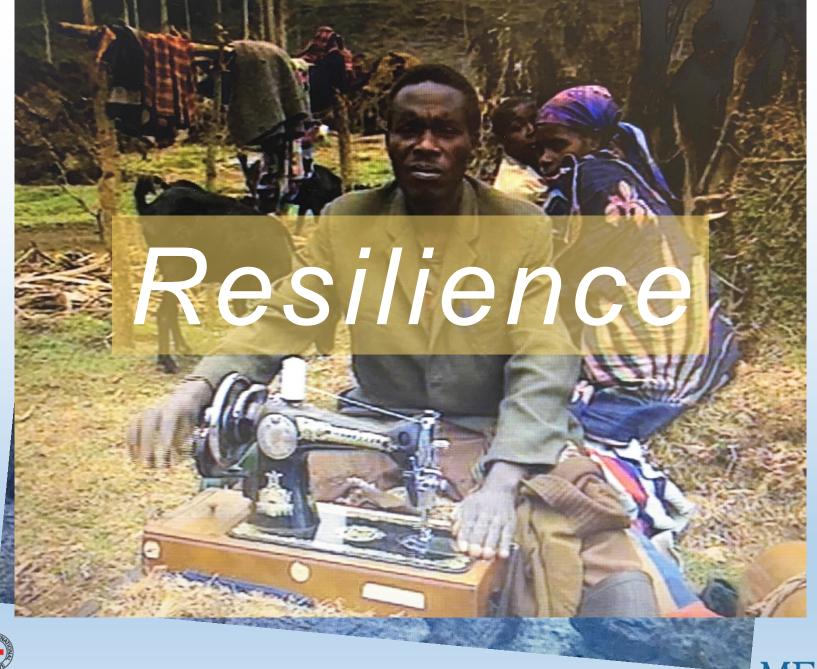




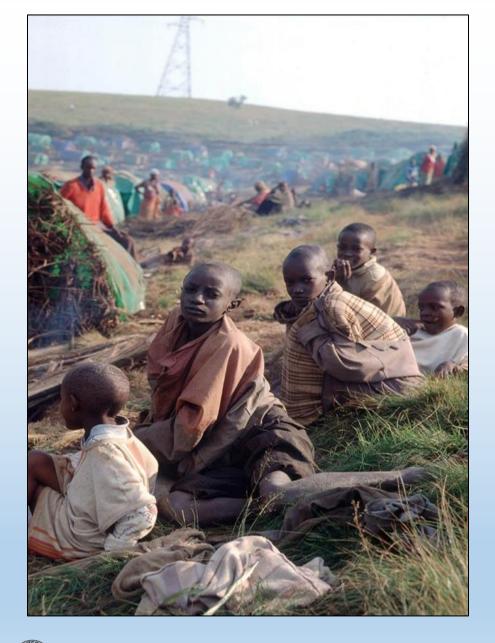












# Avoid the Graves...

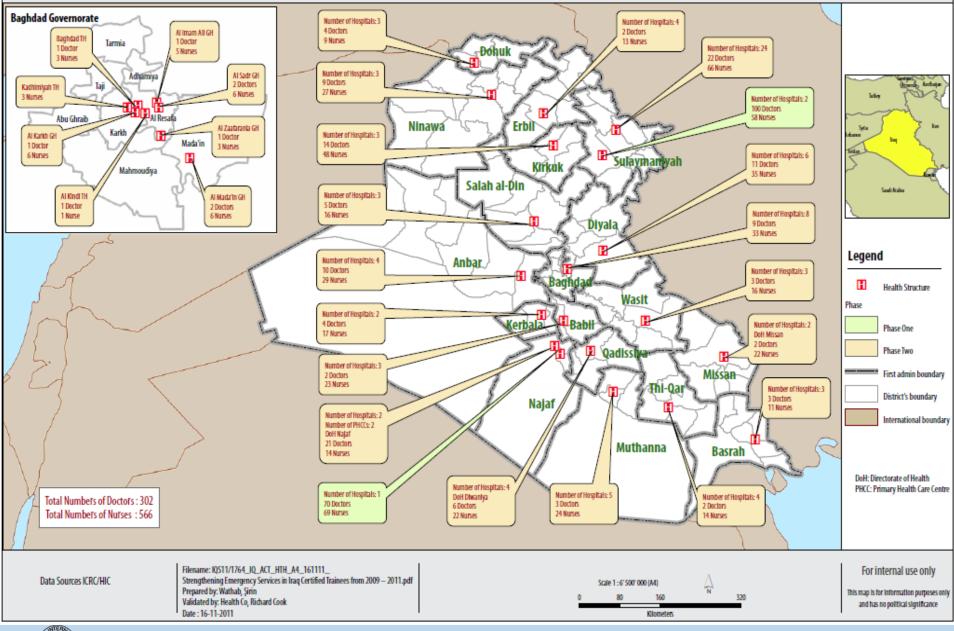




### Nursing Education











IUNU

#### From chaos to order









Airways Control session in Sulaymania, 2010



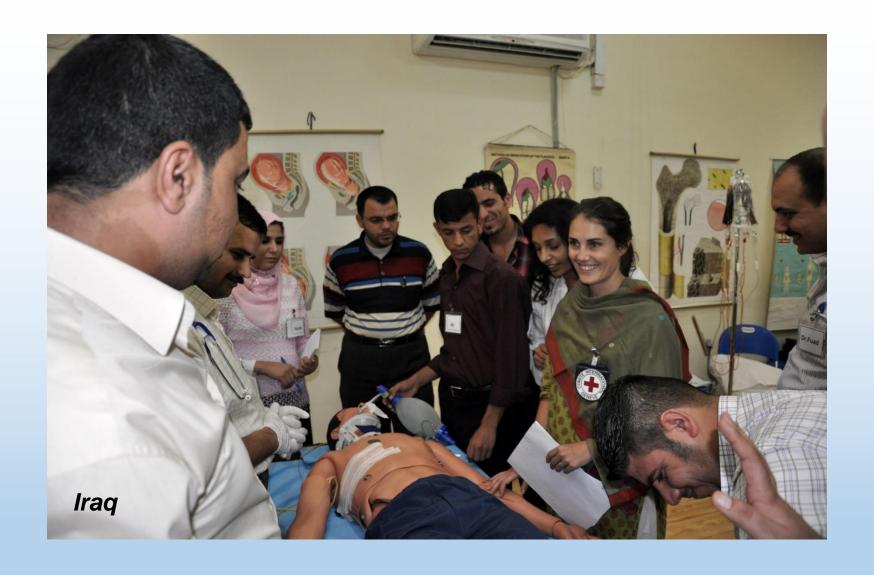












Group session about ventilation control in Sulaymania













#### Working with local staff and authorities









## URBAN SERVICES DURING PROTRACTED ARMED CONFLICT















Emergency room training takes on a real life dimension In Aden, 2015







Principles of proper management of WW





#### General principles

Assess The Patient, Always and again..

A, B, C, D, E....

Look at the wounds

Be able to describe the wound

Do not close wounds

All wounds are left open

Stabilize fractures

**Use splints** 



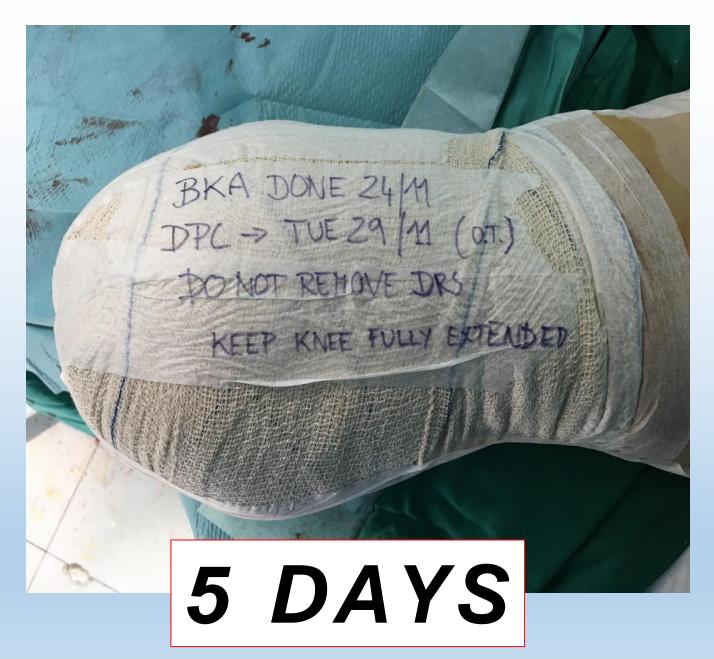


#### The wound needs surgical debridement













#### **Post Operative Care**

**Oozing** 

routi

**Bleeding** 

**Swelling** 

**Smell** 

**Pain** 

**N/V** status





Proper support for the limb, elevation

Mobilize as required or instructed

Get patient out of bed

**Chest physio** 

Family education





#### Use water and soap to wash the limb, the exfix...



And normal saline in the wound







### Team Work





Shukran, Tashakor Merci Danke

Thank You

### Fokanaru les tions? Angalo UES tions?

<del>Gracias</del>

Grazie Obrigado Dankje

. . . . . .





