

International Week

'Diversity in Care'

17 OCT - 21 OCT 2022

Cooperation Bachelor in Nursing

Kortrijk & Roeselare



International Week

'Diversity in Care'

17 OCT - 21 OCT 2022

Staff edition

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Welcome
Schedule
Wednesday October 19th
Thursday October 20th
Friday October 21th

' DIVERSITY IN CARE '
INTERNATIONAL WEEK



Welcome note to the students

During your nursing training, we aim to increase your international competences. These international competences are integrated in different ways in the four-year study program of the Bachelor in Nursing.

In the first training phase we provide you therefore the international Day. For the second training phase, we go a step further and organize the international week "Diversity in Care", a collaboration between the nursing campus Kortrijk and Roeselare. The digital international week will take place in the week of 18 October. Another possibility is to follow a digital international week at a VIVES partner school abroad. Finally, in training phase 2-3-4 we provide the possibility to take an internship abroad, for a minimum of four weeks and a maximum of 12 weeks, both European and intercontinental..

Reaching the international competences (ICOM's) as good as possible is the main goal during the international week. With the international week 'Diversity in Care', we want to make the borders blur and bring you closer and closer to our equals with different cultures, beliefs, diseases, traditions,... with who we come daily into contact in society. A look, closer to your 'own' boundaries...

The difficult covid-19 period we faced, also opened many doors. Teleworking and online meetings are concepts that cannot be imagined without in 2022. That is why the international week 2022-2023 consists of a mix of on and off campus guest speakers.

In addition, this year we have again chosen to organize a day out on Thursday 20 October. During this day you will get to know certain organizations better and together we will make it an interesting and enjoyable day.

We sincerely hope that this week will make you wiser, give a broader view of healthcare worldwide, that you will learn about the SDGs, that 'across borders' is already present in Belgium, ... that this week will help you to discover your unique identity as a nursing student.

We also hope that you will be as enthusiastic as we are and enjoy this week with us. We wish you all the best and let your senses be stimulated !

The 'Diversity in Care' Team

Fauve Buyschaert, John Callens, Stefanie De Ceuninck, Giel Meersseman, Marieke Metzger, Nele Vandeputte, Ellen Vanhaverbeke, Annelies Vancaeyzeele, Elisa Vanryckeghem, Marlies Verstraete, Anne-Lise Vuylsteke, Dries Wittevrongel



Welcome note to incoming staff

We warmly welcome you to our international week and want to thank you as well for your contribution. For you, as teachers, we have of course provided a special program. Of course, you may also follow the sessions of your colleagues/other guest speakers. We also offer our own program. You can register for numerous events. May we kindly ask you to register your interest in advance?

Register below



NOTE: the above link is for incoming staff only. Unfortunately, guest speakers who are not physically present cannot participate. Of course, you are welcome to attend the sessions offered.



**TUESDAY
18TH
OCTOBER**

**WEDNESDAY
19TH
OCTOBER**

**THURSDAY
20TH
OCTOBER**

**FRIDAY
21TH
OCTOBER**

INTRODUCTION

Dries Wittevrongel

**GLOBAL
ENGAGEMENT &
SDG's**

Lies Verstraete & Dries
Wittevrongel

**ARTSEN
ZONDER
VAKANTIE**

Medics without vacation

AFROMEDICA

**8.30 – 9.30
Hospital visit**

**8u30 – 9u30
Online Session**

LUNCH

SESSION 1

SESSION 2

SESSION 3

**International
diner on
campus**

**17.30
Last Post
Ypres**

**THE
END**



**Welcome
activities for
incoming
staff**



KEYNOTE SPEAKERS (IN PLENUM)

WEDNESDAY 19 OCT. - MORNING

8H30 - 9H00: INTRODUCTION

Live Location -

Online Location -

9H00-10H00: GLOBAL ENGAGEMENT & SDG'S

Live Location -

Online Location -

Globalization has turned the world into a 'complex metropolis' with specific global challenges that are increasingly interlinked and interdependent. As a result, higher education is also facing major challenges, as HEIs are expected to educate students with a cosmopolitan attitude to the world. With this in mind, VIVES UAS designed a holistic framework on global engagement, bringing together the inclusive, international and sustainability agendas. This to encourage discussion within HEIs on how to implement the Sustainable Development Goals in the institution's internationalization strategy. Global engagement reflects a movement that goes beyond traditional activities linked to internationalization; it means entering into meaningful collaborations with partners all over the world and it implies deeper and more long-term commitments based on reciprocity and equality. The VLHORA, the network for all 13 UAS in Flanders, has committed itself to use this framework in all its institutions.

10U15-11U00 MEDICS WITHOUT VACATION

Live Location -

Online Location -

Medics Without Vacation is a medical NGO and a dynamic network of 600 medical, paramedical and technical experts in Belgium and Africa, surrounded by a professional team. For 40 years now, our healthcare professionals have been dedicated to accessible and high-quality healthcare. Because that is a right for everyone and because Good health and well-being is one of the SDG's adopted by all United Nations Member States in 2015.

Through exchanges among colleagues and continuous professional training, we support 40 hospitals in Sub-Saharan Africa. So that they can provide sustainable and patient-oriented care themselves. This is how hospitals can grow. This is how healthcare personnel can develop. This is how patients receive the best care. We like to share our approach. (max. 15 min)

One of the fields of expertise of Medics Without Vacation is the management of medical devices. In African hospitals, doctors and nurses struggle daily with poorly maintained medical equipment and infrastructure. Quality healthcare is only possible with ready-to-use and well-maintained equipment and a solid infrastructure (electricity, water, etc.). The World Health Organization (WHO) recognizes this problem and estimates that approximately 50% of the medical equipment in Low-to-Middle-Income Countries is not functioning, not being used optimally or not being maintained. Lieven D'Haese talks about the multiple answers to this challenge.



KEYNOTE SPEAKERS (IN PLENUM)

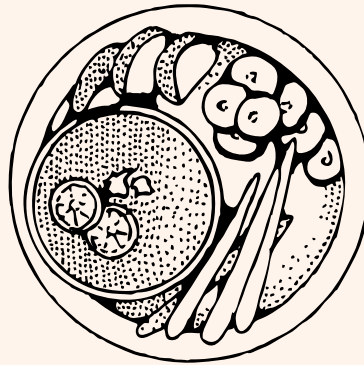
WEDNESDAY 19 OCT. - MORNING

11H00 - 11H45 - AFROMEDICA

Live Location Online Location

AfroMedica is an organization that was founded in 2020 by mostly students who are in the medical field. This came to life because of the disparities that still live on in the health sector in Belgium. Our goal is to bring awareness to the general public about these health related issues and the consequences that come with. We aim to do this by organizing educational events across Flanders and by sharing informational trivia/facts on our social media. In addition, we sit down with educational institutions (University of Ghent and Antwerp) to discuss how to improve the medical curricula. Some events that took place last year: a panel discussion with different health workers, a medical quiz, a lecture about the historical dimensions of our healthcare system...This year there will be more events to look out for. For example Heart for life, the second edition of our Mediquiz and an event in collaboration with another organization.

11H45 - 13H00 - LUNCHBREAK



WEDNESDAY 19 OCT. - 13H00 - 14H00

KOM OP TEGEN KANKER: CULTURAL SENSITIVE CARE NAZIHA MAHER



CULTURAL COMPETENCE IN ONCOLOGY REQUIRES THE ACQUISITION OF SPECIFIC KNOWLEDGE, CLINICAL SKILLS, AND ATTITUDES THAT FACILITATE EFFECTIVE CROSS-CULTURAL NEGOTIATION IN THE CLINICAL SETTING, THUS, LEADING TO IMPROVED THERAPEUTIC OUTCOMES AND DECREASED DISPARITIES IN CANCER CARE. CULTURAL COMPETENCE IN ONCOLOGY ENTAILS A BASIC KNOWLEDGE OF DIFFERENT CULTURAL ATTITUDES AND PRACTICES OF COMMUNICATION OF THE TRUTH AND OF DECISION-MAKING STYLES THROUGHOUT THE WORLD. CULTURAL COMPETENCE ALWAYS PRESUPPOSES ONCOLOGY PROFESSIONALS' AWARENESS OF THEIR OWN CULTURAL BELIEFS AND VALUES. TO BE ABLE TO COMMUNICATE WITH CANCER PATIENTS IN CULTURALLY SENSITIVE WAYS, ONCOLOGISTS AND NURSES SHOULD HAVE KNOWLEDGE OF THE CONCEPT OF CULTURE IN ITS COMPLEXITY AND OF THE RISKS OF RACISM, CLASSISM, SEXISM, AGEISM, AND STEREOTYPING THAT MUST BE AVOIDED IN CLINICAL PRACTICE. ONCOLOGISTS AND NURSES SHOULD DEVELOP A SENSE OF APPRECIATION FOR DIFFERENCES IN HEALTH CARE VALUES, BASED ON THE RECOGNITION THAT NO CULTURE CAN CLAIM HEGEMONY OVER OTHERS AND THAT CULTURES ARE EVOLVING UNDER THEIR RECIPROCAL INFLUENCE ON EACH OTHER. MEDICAL SCHOOLS, NURSING SCHOOLS AND ONCOLOGY TRAINING CAN TEACH COMMUNICATION SKILLS AND CULTURAL COMPETENCE, WHILE FOSTERING IN ALL STUDENTS AND YOUNG DOCTORS AND NURSES THOSE ATTITUDES OF HUMILITY, EMPATHY, CURIOSITY, RESPECT, SENSITIVITY, AND AWARENESS THAT ARE NEEDED TO DELIVER EFFECTIVE AND CULTURALLY SENSITIVE CANCER CARE.

IN THIS WORKSHOP, I WILL BE TELLING ABOUT HOW WE, WITH KOM OP TEGEN KANKER, SUPPORT CANCER PATIENTS WITH A MIGRATION BACKGROUND AND THEIR LOVED ONES IN A CULTURE-SENSITIVE WAY BECAUSE THE REGULAR CARE OFFER IS STILL TOO OFTEN INACCESSIBLE FOR THEM. KOM OP TEGEN KANKER IS A CHAMPION OF GOOD HEALTH CARE AND WELL-BEING AND IT CANNOT BE THAT A PART OF THE POPULATION IS NOT GETTING THE HEALTH CARE IT DESERVES. WE ALSO NOTICE THAT DUE TO THE MANY TABOOS SURROUNDING CANCER AND LOW HEALTH SKILLS, WOMEN IN PARTICULAR ARE LEFT OUT IN THE COLD. KOM OP TEGEN KANKER CANNOT DO THIS ALONE AND NEEDS PARTNERS TO ACHIEVE THIS GOAL.



SESSION 1

WEDNESDAY 19 OCT. - 13H00 - 14H00

DIVERSITY IN HEALTHCARE: AN INTERNATIONAL CONTEXT

MATTIJS SAMYN, B-FAST



THE STRATEGIC WORKING FRAMEWORK OF B-FAST INVOLVES MAKING BELGIAN (MEDICAL) CAPACITIES AVAILABLE AT THE REQUEST OF OTHER STATES THAT ARE CONFRONTED WITH A SUDDEN EMERGENCY SITUATION THAT EXCEEDS THEIR OWN RESOURCES. THE FLEXIBILITY, THE INTERDISCIPLINARY CHARACTER AND THE RAPID RESPONSE SPEED ARE THE DETERMINING CHARACTERISTICS OF THE B-FAST STRUCTURE. THIS WILL BE EXPLAINED ON THE BASIS OF A MISSION CARRIED OUT.

CARE OF A PATIENT ARRIVING IN THE SERVICE OF EMERGENCY

MARIE-HÉLÈNE GENTILHOMME, LYON

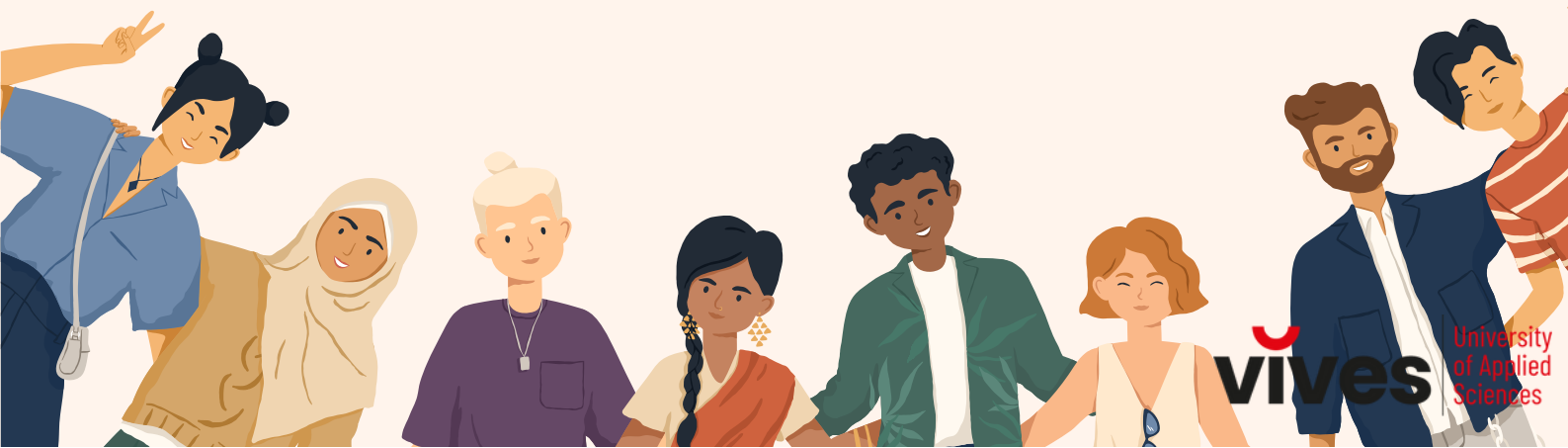
THIS IS AN INTERACTIVE WORKSHOP. THE STUDENTS WILL BE IN SMALL GROUPS AND WILL HAVE TO IDENTIFY THE SIGNS OF SERIOUSNESS IN THE FACE OF A CLINICAL SITUATION WHICH WILL GRADUALLY EVOLVE AND WORSEN. THE STUDENTS WILL HAVE TO IMPLEMENT APPROPRIATE CARE ACTIONS.

EXPERIENCED DISCRIMINATION BY HEALTH STUDENTS AND CARE GIVERS

KATJA LANTING, SAXION HOGESCHOOL



EXPLANATION OF THIS SESSION FOLLOWS



WEDNESDAY 19 OCT. - 13H00 - 14H00

DAKTARI PROJECT VZW – SUPPORTING KILEMBE MINES HOSPITAL

SOPHIE DE BOCK & STEFAAN VAN ONSEM



KILEMBE MINES HOSPITAL IS LOCATED IN KILEMBE, IN THE KASESE DISTRICT OF WESTERN UGANDA.

THE HOSPITAL WAS FOUNDED IN 1952 AS A MEDICAL CENTER FOR THE MINERS FROM THE NEARBY KILEMBE MINES. IN 1982 IT BECAME A COMMUNITY HOSPITAL. WITH NO MORE THAN 200 BEDS, THE HOSPITAL STRUGGLES TO PROVIDE ADEQUATE CARE FOR A VERY LARGE POPULATION. THE HOSPITAL BECAME A CENTER OF REFERENCE FOR ORTHOPAEDIC SURGERY IN THE REGION.

DAKTARI PROJECT WAS FOUNDED IN 2010 BY A GROUP OF ENTHUSIASTIC MEDICAL STUDENTS FROM GHENT, WHO TRAVELED TO THE HOSPITAL TO LEARN AND PARTICIPATE IN DAILY PRACTICE OF THE HOSPITAL. THEY BEFRIENDED A UGANDESE DOCTOR, AND THUS GOT TO KNOW KILEMBE MINES HOSPITAL. FROM THE FRIENDSHIP THAT ORIGINATED THERE, DAKTARI PROJECT WAS BORN. SINCE 2015 THE DAKTARI PROJECT IS OFFICIALLY A NON-PROFIT ORGANIZATION (VZW).

DAKTARI PROJECT VZW AIMS TO SUPPORT THE KILEMBE MINES HOSPITAL IN A SUSTAINABLE WAY, BY MEANS OF FINANCIAL, LOGISTICAL, AND EDUCATIONAL SUPPORT. THIS IS REALIZED BY OFFERING COURSES AND SUPPORT ON SITE TO THE HOSPITAL STAFF, AS WELL AS ORGANIZING FUNDRAISERS IN BELGIUM (EG. DAKTARI TOUR, TOTE BAG SALE, PIANO CONCERT, WARMSTE WEEK...). DAKTARI PROJECT CURRENTLY FOCUSES ON FOUR MAIN CAUSES: INFECTION PREVENTION, ORTHOPAEDICS, MATERNAL CARE AND WOUND CARE. TRAINING COURSES FOCUS ON EVIDENCE BASED MEDICINE, RELYING ON THE AVAILABLE MEANS IN THIS DEVELOPING COUNTRY.

IN 2015, THE HOSPITAL SUFFERED FROM SEVERE FLOODS, AND PART OF THE HOSPITAL BUILDING AND STAFF RESIDENCES WERE DESTROYED. IN 2020, TWO EVEN MORE SEVERE FLOODS DESTROYED MOST OF THE REMAINING INFRASTRUCTURE. THE HOSPITAL WAS FORCED TO RELOCATE TO THE NEARBY CITY OF KASESE. THIS IS SIGNIFICANTLY FURTHER AWAY FROM THE LOCAL POPULATION OF THE MOUNTAIN VILLAGE OF KILEMBE, WHICH CAUSES NEW CHALLENGES CONCERNING ACCESS TO HEALTH CARE FOR THESE PEOPLE.



SESSION 1

WEDNESDAY 19 OCT. - 13H00 - 14H00

INTIMATE PARTNER VIOLENCE **EMMA VANKEURSBILCK, SEXUOLOGIST AND CAREGIVER**

INTIMATE PARTNER VIOLENCE IS AN ACTUAL AND GLOBAL PROBLEM. A HARROWING NUMBER OF 1 IN 7 WOMAN EXPERIENCED INTIMATE PARTNER VIOLENCE IN THE LAST 12 MONTHS. THIS CAN BE PHYSICAL, PSYCHOLOGICAL, SEXUAL AND/OR EMOTIONAL ABUSE. IN CAW WE OFFER SUPPORT FOR VICTIMS, PERPETRATORS AND COUPLES WHO EXPERIENCED ANY FORM OF INTIMATE PARTNER VIOLENCE. WE SUPPORT THEM IN TRYING TO PROCESS WHAT HAPPENED, IN REDUCING AGGRESSION PROBLEMS, IN FINDING BACK THE LOVE IN EACH OTHER OR IN A DIVORCE PROCESS. WE SEE PEOPLE OF ALL CULTURES AND SOCIAL CLASSES COMING BY FOR SUPPORT. AS A CAREGIVER WE DISAPPROVE THE AGGRESSIVE BEHAVIOUR BUT WE TRY TO SEE THE PERSON AS A WHOLE AND NOT DEFINE THAT PERSON ONLY BY HIS OR HER ACTIONS. IN THIS LECTURE I SKETCH THE BACKGROUND OF INTIMATE PARTNER VIOLENCE, I'LL GUIDE YOU THROUGH WHAT WE CAN DO AS A CAREGIVER WHEN WE GET IN TOUCH WITH SOMEONE WHO EXPERIENCED INTIMATE PARTNER VIOLENCE, WHAT WE OFFER IN CAW AND TO WHAT SUSTAINABLE DEVELOPMENT GOALS CAN BE LINKED TO INTIMATE PARTNER VIOLENCE.

BLOEMFONTEIN SOUT AFRICA - ONLINE SESSION **ANNA-MARIE WELMAN**

EXPLANATION OF THIS SESSION FOLLOWS



PREPATATION WORKSHOP FEDASIL REFUGE **ANNELIES VANCAEYZEELE**

THIS SESSION IS ONLY FOR STUDENTS WHO GO TO POELKAPELLE



ATTENTION: IF YOU REGISTER FOR THE DAY-OUT IN POELKAPELLE (FEDASIL), YOU HAVE TO CHOOSE THIS SESSION THE PREPARATION WORKSHOP FEDASIL REFUGE SHELTER. THE AIM IS TO COORDINATE AND PREPARE THE THE WORKSHOP THAT WILL BE GIVING DURING THE VISIT.

PREPATATION WORKSHOP LILLE **MARIEKE METZGER**

THIS SESSION IS ONLY FOR STUDENTS WHO GO TO LILLE

(!) ATTENTION: IF YOU REGISTER FOR THIS DAY OUT YOU HAVE TO CHOOSE ON WEDNESDAY AFTERNOON SESSION 1 (13:00 - 14:00) PREPARATION WORKSHOP LILLE. THE AIM IS TO COORDINATE AND PREPARE THE WORKSHOP IN FRENCH THAT WILL BE GIVING DURING THE VISIT.

WEDNESDAY 19 OCT. - 14H30 - 15H30

COVID, WHAT WE ARE CONCERNED ABOUT....

KRIS VERMAEL, DIRECTOR WZC BIEZENHEEM – WZC SINT-JOZEF

I AM WORKING TOGETHER WITH A CONGREGATION OF LOCAL RELIGIOUS SISTERS WHO FIGHT DAILY AGAINST THE POVERTY OF THE LOCAL POPULATION. THEY ARE ENGAGED IN EDUCATION, ESPECIALLY FORMATION OF 'OFTEN ABUSED' SINGLE MOTHERS. THEY ARE INVOLVED IN DIFFERENT INITIATIVES FOR HEALTHCARE AND COMMITMENT TO MALNOURISHED CHILDREN.

WITH SHORT VIDEO IMAGES AND SOME IMAGES, WE TRY TO DISCOVER AND UNDERSTAND THE WAY OF LIVING, OR SURVIVE, IN THE CONGOLESE KIVU REGION. POVERTY AND INSECURITY DOMINATE THE DAILY LIVE IN THE REGION BECAUSE THE POPULATION IS EXPLOITED FOR THE RICHNESS OF THE MINERALS IN THE SUBSOIL. IN AUGUST I WAS BACK THERE, AND I COULD EXPERIENCE HOW THE LOCAL POPULATION PERCEPTE THE COVID DISEASE AND HOW THEY DEAL WITH IT. IT IS AN UNIQUE EXAMPLE OF THEIR FUNDAMENTAL DISTRUST IN THE WESTERN WHITE RULERS AND THEIR OWN 'DEMOCRATIC' LEADERS.

THIS IS IN STARK CONTRAST TO THE RAPIDLY EVOLVING RWANDAN SITUATION WHERE AN AUTHORITARIAN REGIME GAINS MUCH MORE CONFIDENCE FROM THE POPULATION AND WHERE LIVING CONDITIONS IMPROVE QUICKLY.

THE GOVERNMENT AND THE RWANDESE POPULATION IS MUCH MORE AWARE ABOUT ECOLOGIC VALUES AND SUSTAINABLE LIVING TOGETHER BECAUSE A LARGE NUMBER OF THE POPULATION NO LONGER HAVE TO LOOK EVERY DAY TO SEE HOW THEY CAN SURVIVE. WE CAN EVEN LEARN LESSONS FROM THEM HOW TO AVOID VICTIMS OF THE COVID PANDEMIC.

WORKING IN SINT-JANS-MOLENBEEK: CHALLENGES AND EXPERIENCES

GLADYS DELEPIERRE, KIND EN GEZIN

MOLENBEEK IS DEFINITELY A CHALLENGING, BUT ALSO INTERESTING COMMUNE TO WORK IN. MY WORKING AREA IS CALLED THE 'OLD MOLENBEEK'. IN THIS SMALL ZONE, THERE IS A VERY HIGH PERCENTAGE OF IMMIGRANTS, A HIGH POVERTY RATE AND A HIGH RATE OF ILLITERACY. YOU CAN FIND PEOPLE WHO ARE 'ILLEGALLY' IN THE COUNTRY, OTHERS ARE IN ASYLUM PROCEDURE OR HAVE A STAYING PERMIT OF ONE YEAR.

LIVING IN THERE CONDITIONS IS CHALLENGING, BOTH FOR THE FAMILIES IN THIS SITUATION, AS FOR THE HEALTH CARE WORKERS. THE LOW SCHOOLING RATE AND THE PRECARIOUS RESIDENCE SITUATION OFTEN INVOLVES OTHER ISSUES SUCH AS: UNSANITARY HOUSES, LOW INCOME/WORKLESS OR WORKING IN BLACK, POOR ACCESS TO HEALTH CARE, POOR STIMULATION OF BABIES/CHILDREN.

WE SEE PEOPLE FROM VARIOUS ETHNICAL GROUPS AND COMMUNITIES. FOR EXAMPLE: ROMA AND DOMS COMMUNITY. BESIDES THAT, THERE ARE A LOT OF DIFFERENT RELIGIONS AND BELIEFS.

DURING THE PRESENTATION, I WOULD LIKE TO SHOW THE BELGIAN STUDENTS HOW IT IS TO WORK IN MOLENBEEK AND WHICH CHALLENGES OCCUR IN THIS AREA. BUT ALSO TO SHOW THE INTERESTING AND BEAUTIFUL ASPECTS OF THIS JOB, MOLENBEEK IS STILL TARGETED WITH A LOT OF PREJUDGES, BUT IT IS ALSO A PLACE WITH A LOT OF JOY AND HOSPITALITY.

WEDNESDAY 19 OCT. - 14H30 - 15H30

HEALTHY AGEING: A GLOBAL INTERNATIONAL AND INTERCULTURAL OPPORTUNITY

ANDREEA ZAMFIRESCU, UNIVERSITY OF MEDICINE AND PHARMACY "CAROLDAVILA", BUCHAREST

AGEING IS A SUCCESS, BOTH AT INDIVIDUAL AND POPULATIONAL LEVEL. POPULATION AGEING IS A GLOBAL INTERNATIONAL AND INTERCULTURAL TOPIC; THERE ARE DIFFERENCES BUT ALSO SIMILARITIES OF AGEING BETWEEN COUNTRIES. HEALTHY AGEING KEEPS THE ELDERLY HEALTHY, INDEPENDENT AND ACTIVE. AGE-FRIENDLY CITIES IS A WHO CONCEPT, WITH 8 INTERCONNECTED DOMAINS OF URBAN LIFE: COMMUNITY AND HEALTH CARE, TRANSPORTATION, HOUSING, SOCIAL PARTICIPATION, OUTDOOR SPACES AND BUILDINGS, RESPECT AND SOCIAL INCLUSION, CIVIC PARTICIPATION AND EMPLOYMENT, COMMUNICATION AND INFORMATION. COMMUNITY AND HEALTH SERVICES SHOULD BE LOCATED CLOSE TO WHERE THE ELDERLY LIVE; TRAINED HEALTH AND SOCIAL WORKERS SHOULD PROVIDE THESE SERVICES. SERVICES MUST INCLUDE PREVENTIVE CARE, GERIATRIC CLINICS, HOSPITALS, ADULT DAY CENTRES, RESPITE CARE, REHABILITATION, RESIDENTIAL NURSING HOME CARE, HOME CARE AND PALLIATIVE CARE, IN ORDER TO MEET THE DIVERSE NEEDS OF ELDER CARE. THESE SERVICES SHOULD BE EASILY ACCESSIBLE AT LOCATIONS CONVENIENT FOR SENIORS TO REACH. EDUCATION ON THE HEALTH SYSTEM AND AVAILABLE HEALTH SERVICES IS ALSO CRUCIAL. SUGGESTED ROLE PLAY: PERCEPTION OF AGEING AMONG STUDENTS, MAKING STUDENTS "FEEL" OLD IN ORDER TO INFLUENCE THEIR ATTITUDE TOWARDS AGEING AND ELDER CARE.

NURSING CARE IN PATIENTS WITH MULTIPLE COMORBIDITIES AND CLOSTRIDIODES DIFFICILE INFECTION

LORENA CIUMĂRNEAN, MD, PHD, SENIOR LECTURER
MIRCEA VASILE MILACIU, MD, PHD, ASSISTANT PROFESSOR

OUR WORKSHOP IS AN INTERACTIVE ONE, AIMING TO STIMULATE THE STUDENT'S INTEREST IN DEVELOPING PRACTICAL SKILLS FOR DIFFICULT DAY-TO-DAY SITUATIONS IN NURSING PATIENTS WITH MULTIPLE COMORBIDITIES. THE WORKSHOP IS STARTING FROM A CASE PRESENTATION OF ONE OF OUR PATIENTS, WHO WAS PRESENTED TO US IN A SEPTIC SHOCK STATUS FOLLOWING A SEVERE FORM OF ENTERITIS WITH CLOSTRIDIODES DIFFICILE (C. DIFF). NOWADAYS, THIS INFECTION IS CONSIDERED A PUBLIC HEALTH THREAT BECAUSE C. DIFF. IS THE MOST COMMON PATHOGEN IN HOSPITALS, ALSO WITH AN INCREASED RISK OF COMMUNITY-ACQUIRED INFECTION. THE C. DIFF. INFECTION LEADS TO PROLONGED HOSPITALIZATION AND SIGNIFICANT BURDEN FOR HOSPITAL EMPLOYEES, PARTICULARLY FOR NURSES. WHEN CARING FOR A PATIENT WITH THIS PARTICULAR INFECTION, NURSES SHOULD EMPLOY THE SAME PROTOCOLS AS IF CARING FOR A PATIENT WITH ANY GASTROINTESTINAL CONTAGIOUS DISEASE AND DIARRHEA. IN A PATIENT WITH MULTIPLE COMORBIDITIES, THIS INFECTION CAN PROVE FATAL. OUR WORKSHOP WILL GO THROUGH THE STEPS OF NURSING IN THESE TYPES OF PATIENTS.

WEDNESDAY 19 OCT. - 14H30 - 15H30

INSTITUTE OF TROPICAL MEDICINE

LUDWIG APERS, PDH, CLINICIAN, SENIOR LECTURER - INSTITUTE OF TROPICAL MEDICINE

THINK GLOBALLY, START LOCALLY... ITM IS BASED IN ANTWERP, BUT WORKS WITH PARTNERS ALL OVER THE WORLD. IN THIS INTERACTIVE PRESENTATION WE WILL MAINLY FOCUS ON THE WAY IN WHICH THIS RATHER SMALL INSTITUTE TRIES TO BE 'BIG' IN RESEARCH, TRAINING AND SERVICES. IT WILL BECOME CLEAR HOW TROPICAL DISEASES AND HEALTH CARE INSTITUTIONS ARE STRONGLY LINKED TO THE SUSTAINABLE DEVELOPMENT GOALS. THE SDGS THAT WILL RECEIVE PARTICULAR ATTENTION ARE POVERTY AND HUNGER, HEALTH AND WELL-BEING, CLEAN WATER AND SANITATION. PRACTICAL EXAMPLES, BOTH FROM BELGIUM AND OVERSEAS COUNTRIES, WILL EXPLAIN THE MANY AREAS IN WHICH OUR EMPLOYEES ARE ACTIVE, AND SHOW HOW WE ARE TRYING TO ACHIEVE THE AMBITIOUS GOALS BY 2030, TOGETHER WITH OUR INTERNATIONAL PARTNERS. .



RECOGNIZING SIGNALS OF TRAUMA

NILS VANDENBROUCKE, TRAUMAPSYCHOLOGIST, SOLENTRA

SOLENTRA IS AN EXPERT IN PSYCHOLOGICAL CARE AND SUPPORT FOR YOUNG REFUGEES AND THEIR FAMILIES. OFTEN THEY ARE SUFFERING FROM TRAUMAS CAUSED BY WAR, WHICH ASK FOR A VERY SPECIFIC APPROACH.

OUR WORK COVERS A WIDE SOCIAL CONTEXT, BECAUSE MENTAL HEALTH IS AN ISSUE THAT AFFECTS EVERYONE INVOLVED WITH THE CHILD. ESPECIALLY WITH SOMETHING AS COMPLEX AS THE MIGRATION PROCESS.

BESIDES, THE RIGHT TO GOOD HEALTH IS AN ABSOLUTELY BASIC RIGHT. A HUMAN RIGHTS-BASED PERSPECTIVE IS THE FOUNDATION OF OUR WORK: FOR THE RIGHT TO GOOD HEALTH IS A BASIC RIGHT THAT EVERYONE SHOULD ENJOY. CONTRIBUTIONS TO SUSTAINABLE DEVELOPMENT GOAL 3 (SDG3) FROM THE UNITED NATIONS IS THUS AT THE CORE OF OUR ACTIVITIES. SDG3 AIMS TO ENSURE THAT HEALTH CARE IS ACCESSIBLE, AFFORDABLE AND GOOD QUALITY. JUST LIKE WE DO.

THE REALISATION OF THIS VISION REQUIRES A BROAD ECOLOGICAL VISION OF PSYCHOLOGICAL HEALTH. A VISION WHICH ENABLES US TO APPRECIATE THAT PSYCHOLOGICAL ISSUES ARE NOT JUST BOUND TO THE INDIVIDUAL, BUT ARE EQUALLY AS INFLUENCED BY ENVIRONMENTAL FACTORS AND THE SOCIETAL CONTEXT.

IN THIS LECTURE, WE WILL FOCUS ON RECOGNIZING SIGNALS OF TRAUMA AND WHAT YOU CAN DO.

WEDNESDAY 19 OCT. - 14H30 - 15H30

TECHNICAL COURSE ABOUT IMPLANTABLE VENOUS ACCESS DEVICE

MÉLANIE POTHERAT, LYON

TECHNICAL COURSE ABOUT IMPLANTABLE VENOUS ACCESS DEVICE : WHAT IS THIS CATHETER, HOW DOES IT WORK , WHY USE IT , HOW TO USE IT (HYGIENE RULES)

MERCY SHIPS: MEDICAL AID, STRAIGHT TO THE POINT

LUC SIMOENS, MERCY SHIPS



MERCY SHIPS IS AN INTERNATIONAL CHARITY DEDICATED TO THE DEVELOPMENT OF MEDICINE IN DEVELOPING COUNTRIES.

THE POOREST OF THE LOCAL POPULATION RECEIVE FREE SPECIALIST MEDICAL CARE ON BOARD MERCY SHIPS' HOSPITAL SHIPS. IN ADDITION, MERCY SHIPS ACTIVELY PARTICIPATES IN THE DEVELOPMENT OF HEALTH CARE IN AFRICA: TRAINING AND FURTHER EDUCATION IN VARIOUS FIELDS OF MEDICINE, HYGIENE, NUTRITION, COMMUNITY BUILDING AND HEALTH INFRASTRUCTURE. THE PROJECTS DEVELOPED THUS ENSURE A LASTING CHANGE.

MERCY SHIPS BRINGS HOPE AND HEALING TO THE POOREST OF THE POOR BY MOBILISING GENERAL AND SPECIALIST VOLUNTEERS WORLDWIDE. THEY PUT THEIR HIGHLY PROFESSIONAL KNOWLEDGE AND SKILLS IN THE FIELDS OF HEALTH CARE, MARITIME WORK AND LOGISTICS AT THE SERVICE OF THE LOCAL POPULATION, FREE OF CHARGE. THIS INTERNATIONAL CREW IS DEPLOYED ON BOARD THE TWO HOSPITAL SHIPS 'AFRICA MERCY' AND 'GLOBAL MERCY' AND IN THE TARGET COUNTRIES.

SINCE 1978, MERCY SHIPS' FLEET HAS OPERATED IN MORE THAN 70 PORTS OF CALL AROUND THE WORLD. ITS DEDICATED VOLUNTEERS COME FROM MORE THAN 50 COUNTRIES AND POOL THEIR SKILLS TO MAKE A LASTING DIFFERENCE.



WEDNESDAY 19 OCT. - 16H00 - 17H00

We would like to offer you speakers who will share their internship experience with you.

In addition, we invited our special guest, Hanne Dejonckheere, who will talk about co-founder of the organisation 'Vivir en Amor' in the beautiful country of Guatemala.

Choose and enjoy!

FIRST INTERVENTION GHANA

BRITT D.

FIRST INTERVENTION GHANA (FIG) IS A VOLUNTEER BASED EMERGENCY RESPONSE, SOCIAL AND HEALTH CARE NON-PROFIT ORGANIZATION IN GHANA.

FIRST INTERVENTION GHANA'S VOLUNTEER PROJECT PROVIDES YOU OPPORTUNITY TO ENGAGE IN A NEW CULTURE, INVEST IN GENUINE RELATIONSHIPS WITH PARTICIPATING COMMUNITIES, AND CONTRIBUTE IN A MEANINGFUL WAY TO PROJECTS THAT MAKE A LASTING DIFFERENCE.

WE OFFER A WIDE VARIETY OF OPTIONS FOR INDIVIDUALS OR GROUPS INTERESTED IN LONG-TERM VOLUNTEER OPPORTUNITIES. WE CAN ACCOMMODATE VOLUNTEERS IN AREAS OF—MEDICINE, AGRICULTURE, TEACHING, ENGINEERING, PHARMACY, BUILDING, CARE, TOURISM, EMERGENCY AND TRAUMA, FIRE FIGHTING ETC—WHO WOULD LIKE TO UTILIZE THEIR EXPERTISE FOR SUSTAINABLE, LIFE-CHANGING WORK. ESTABLISH IN 2009, COMPRISING A TEAM OF HIGHLY SKILLED STAFF, DELIVERS WITH A MODIFIED TAILORED PROGRAMS COVERING HEALTH INTERVENTIONS, SOCIAL MEETINGS, ECONOMIC, CULTURAL, ENVIRONMENTAL, CHILDREN AND OTHER INTEREST

VIVIR ET AMOR

HANNE DEJONCKHEERE

VIVIR EN AMOR IS A LOCAL OPERATION OF TWO HEALTH POSTS IN THE VILLAGES OF YALANHUITZ AND POJOM, LOCATED IN THE NORTHWEST OF GUATEMALA SUPPORTED BY A BELGIUM NON-PROFIT ORGANIZATION.

IN 2002, VIVIR EN AMOR BUILT A HEALTH POST, THE 'CLINICA', IN YALANHUITZ IN COOPERATION WITH THE LOCAL POPULATION. IN 2008, A SECOND ONE FOLLOWED, IN POJOM, WHICH WAS NAMED 'CASA MATERNA'.

OVER THE YEARS, A TEAM OF LOCAL EMPLOYEES (PROMOTERS) HAS BEEN BUILT UP AROUND EACH HEALTH POST.

THE NETHERLANDS

ILSE C.

OUR NEIGHBOURING COUNTRY, THE NETHERLANDS. A COUNTRY CLOSE TO HOME AND YET A COUNTRY WITH MANY DIFFERENCES WITHIN THE HEALTHCARE LANDSCAPE. ENJOY THIS SESSION WITH THE EXPERIENCES ILSE HAD DURING HER INTERNSHIP IN THE NETHERLANDS.

WEDNESDAY 19 OCT. - 16H00 - 17H00

CONTANO

BRITT V.

"CONTANO IS MANDINKA FOR HAPPINESS. AND ALTHOUGH IT IS SAID THAT HAPPINESS IS FOUND IN SMALL THINGS, WE DO NOT HIDE IT: OUR AMBITION WITH THE NON-PROFIT ORGANISATION IS BIG.

IN GENERAL, WE FOCUS ON THE PEOPLE OF BASSE, IN THE EAST OF THE GAMBIA. WE HAVE A COOPERATION WITH SEVERAL COLLEGES TO SEND STUDENTS FROM DIFFERENT FIELDS OF STUDY IN THE WELFARE SECTOR ON INTERNSHIPS TO BASSE. STUDENTS ON WORK PLACEMENTS ABROAD CAN ENSURE FOLLOW-UP AND CONTINUITY, ALWAYS IN CONSULTATION WITH LOCAL PROFESSIONALS.

IN PARTICULAR, WE CONTINUE TO FOCUS ON WOMEN AND MOTHERS IN BASSE WHO LIVE IN VULNERABLE SITUATIONS. WITH A WARM HEART AND A LISTENING EAR, WE WANT TO BRING THEIR STORIES OF INTRA-FAMILY VIOLENCE AND POVERTY OUT OF THE SHADOWS AND MAKE THEM DEBATABLE.

ZAMBIA

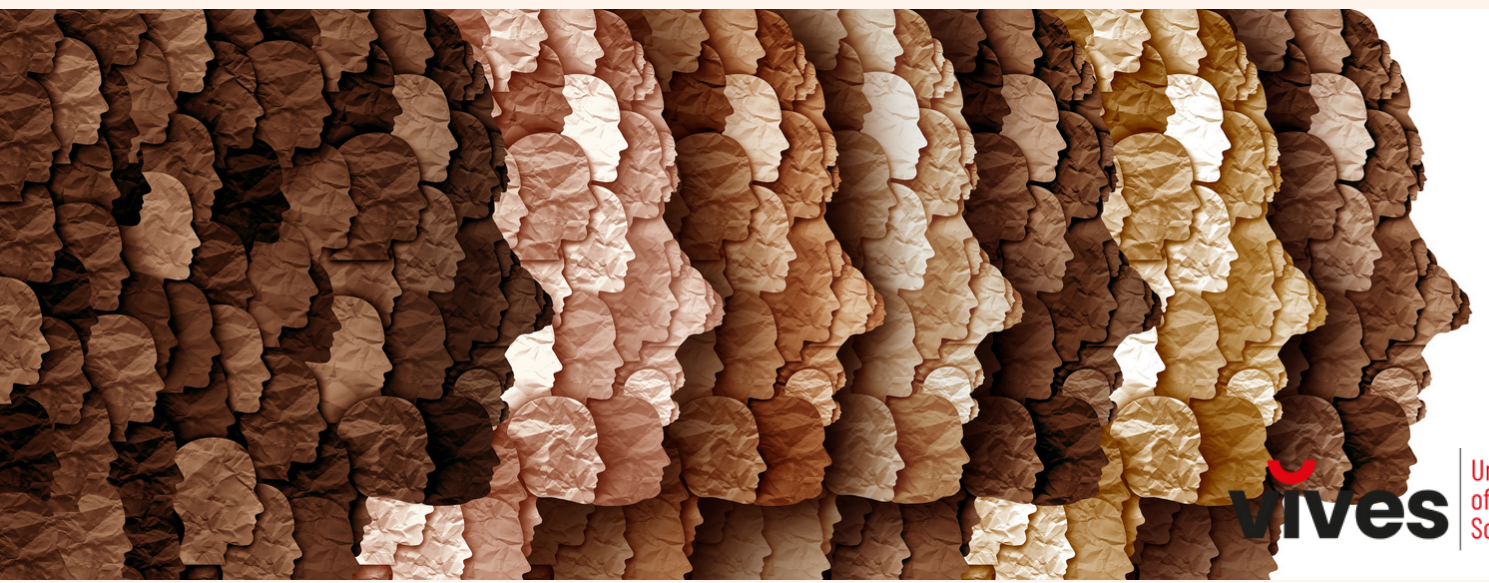
JULIE V.

ZAMBIA, WITH ITS IMPRESSIVE VICTORIA FALLS AND THE ZAMBEZI RIVER, IS THE PERFECT DESTINATION FOR THE ADVENTUROUS AFRICA LOVER. IT IS ALSO AN IMPRESSIVE COUNTRY FOR AN INTERNSHIP. JULIE WILL SHARE HER ADVENTURE WITH YOU LIVE, FROM ZAMBIA, THROUGH THIS SESSION.

PORTUGAL

MARIE N.

PORTUGAL, THE LAND OF PORT, GOOD (GREASY) FOOD, BEAUTIFUL BUILDINGS, LOVELY TEMPERATURES AND BEAUTIFUL PEOPLE. BESIDES, PORTUGAL IS A EUROPEAN COUNTRY THAT IS A BIT CHEAPER TO VISIT COMPARED TO ITS NEIGHBOURING COUNTRIES. WE ALSO HAVE VERY GOOD INTERNSHIP PARTNERS THERE. CURIOUS ABOUT THE STUDENT, MARIE, HER EXPERIENCES?



WEDNESDAY 19 OCT. - 16H00 - 17H00

UGANDA

JOHN CALLENS, SARAH VERSCHUERE AND STUDENTS

UGANDA LIES ON THE EQUATOR IN EAST AFRICA AND CONTAINS A GREAT VARIETY OF NATURE AND A RICH AFRICAN CULTURE. THAT IS WHY THE COUNTRY IS ALSO CALLED THE 'PEARL OF AFRICA'. TWO PEARLS OF COLLEAGUES, JOHN AND SARAH, WILL TELL YOU LIVE FROM UGANDA WHAT MAKES THIS COUNTRY AND INTERNSHIP SO SPECIAL. IF POSSIBLE, STUDENTS WHO ARE THERE WILL HELP SHAPE THIS SESSION.

REVIVE VZW

RENÉE D

REVIVEVZW IS AN ORGANISATION THAT PROVIDES SPECIALISED MEDICAL ASSISTANCE IN PLACES WHERE LARGE HUMANITARIAN AID ORGANISATIONS DO NOT OPERATE. AS STUDENTS, YOU CAN JOIN THEM ON MISSION FOR A SHORT MOBILITY (2 TO 4/5 WEEKS). THIS IS ESPECIALLY FOR STUDENTS WHO DO NOT WANT TO BE AWAY FROM HOME FOR LONG AND YET WANT TO ENJOY A FOREIGN EXPERIENCE. ENJOY THIS SESSION BROUGHT TO YOU BY RENÉE.



Thursday

STAFF PROGRAM

20 OCT. 2022

KORTRIJK/ YPRES

| HOUR | ACTIVITY |
|-------|---|
| 8.30 | Visit at the Hospital (AZ Groeninge) With breakfast ! |
| | |
| 17.00 | Visit The Last Post in Ypres |



ONLINE SESSIONS

21 OCT. 2022

Friday

DIVERSITY MENTAL HEALTH CARE: ACCEPTANCE OF DIVERSITY LEADS TO A VARIETY OF THE SERVICES PROVIDED.

ELENI KONSTANTINOU & KONSTANTINOS TSOUKAS WEST-ATTICA GREECE

MENTAL HEALTH IS MULTIDIMENSIONAL AND ANY INTERVENTIONS ATTEMPTED SHOULD BE HOLISTIC IN NATURE, TAKING INTO ACCOUNT ALL PARAMETERS. MODERN APPROACHES AND GOOD PRACTICES IN MENTAL HEALTH WHETHER CONCERNING PREVENTION AND PROMOTION OF HEALTH AND WELL-BEING OR CONCERNING RECOVERY, EMPOWERMENT, EDUCATION AND REHABILITATION INCLUDE AND ASSIMILATE THE DIFFERENT CULTURAL CHARACTERISTICS OF PERSONS. MENTAL HEALTH SERVICES THAT ARE ORIENTED AROUND A PERSON'S BIO-PSYCHOSOCIAL STATUS ARE EFFECTIVE NOT ONLY BECAUSE THEY FOCUS ON PRINCIPLES, VALUES AND PERCEPTIONS THAT AFFECT HEALTH AND DISEASE, BUT ALSO BECAUSE THEY ULTIMATELY ENHANCE A GENERAL SENSE OF MULTICULTURALISM AND DIVERSITY. THE PRESENTATION WILL MAKE REFERENCE TO EXAMPLES OF APPROACHES AND GOOD PRACTICES THAT ARE PART OF THE PHILOSOPHY OF DIVERSITY MENTAL HEALTH CARE, AND WHICH AIM AT THE WELL-BEING OF A PERSON ALL-AROUND.

OVERVIEW OF HEALTH CARE SYSTEM IN BHUTAN ELENI KONSTANTINOU

MS. SONAM CHOKI, ASSOCIATE PROFESSOR, ROYAL THIMPHU COLLEGE BUTHAN

THIS PRESENTATION WILL BE ON THE OVERALL HEALTH CARE SYSTEM IN BHUTAN. IT IS INTENDED TO GIVE AN OVERVIEW ON HOW HEALTH CARE SYSTEM IN BHUTAN FUNCTIONS, ITS ACHIEVEMENTS AND CHALLENGES.

THE FIRST SECTION WOULD BE BRIEFLY INTRODUCING BHUTAN FOLLOWED BY AN OVERVIEW ON THE HISTORICAL BACKGROUND OF THE MODERN HEALTH CARE SYSTEM IN BHUTAN.

THE SECOND SECTION WOULD BE TO GIVE A SNEAK PEEK INTO THE CONCEPT OF HEALTH AND DISEASE FROM BHUTANESE CULTURAL PERSPECTIVE, ITS BENEFITS AND CHALLENGES. THIS WOULD BE FOLLOWED BY A BRIEF INTRODUCTION ON THE TRADITIONAL MEDICINE SYSTEM IN BHUTAN AND ITS INTEGRATION INTO THE MODERN HEALTH CARE SYSTEM, ITS BENEFITS AND CHALLENGES

FINALLY, IT WOULD BE ON THE STRUCTURE OF HEALTH CARE SYSTEM IN BHUTAN WITH STATUS ON THE WHO 6 BUILDING BLOCKS OF HEALTH CARE SYSTEM AND ALSO ACHIEVEMENT IN TERMS OF HEALTH RELATED SDGS.



ONLINE SESSIONS

21 OCT. 2022

Friday

FEDASIL - A LOOK BEHIND THE SCENES

ANNELIEN VERHOEGSTRAETE

IN 2021, 25971 REFUGEES ENDED UP IN THE FEDASIL COLLECTION SYSTEM. THE MAIN COUNTRIES OF ORIGIN WERE SYRIA, AFGHANISTAN, PALESTINE, EL SALVADOR AND ERITREA. FEDASIL IS A FEDERAL AGENCY FOR THE RECEPTION OF ASYLUM SEEKERS. REFUGEES ARE PEOPLE WHO HAVE TO FLEE THEIR HOMELAND BECAUSE THEY ARE PERSECUTED. AND THIS BECAUSE OF THEIR RACE, NATIONALITY, POLITICAL CONVICTION, RELIGION OR BECAUSE THEY BELONG TO A CERTAIN SOCIAL GROUP (E.G. LGBT PEOPLE, OR WOMEN). WE OFFER THEM A HIGH-QUALITY RECEPTION WHICH IS MORE THAN THE WELL-KNOWN 'BED-BATH-BREAD'. THE INDIVIDUAL GUIDANCE OF RESIDENTS IS UNDENIABLY AN ADDED VALUE IN OUR COLLECTION SYSTEM AND DESERVES ATTENTION. AS A NURSE, WE ARE RESPONSIBLE FOR THE INITIAL CARE, REFERRAL AND FOLLOW-UP OF THE RESIDENTS. ON TOP OF THAT, SINCE MARCH 2020, WE HAVE BEEN FACING MANY ADDITIONAL CHALLENGES, ABOUT WHICH I WILL TELL YOU MORE DURING THE WEBINAR. IN ADDITION TO THESE NURSING CARE, WE HAVE A NUMBER OF PROJECTS IN WHICH THERE ARE EUROPEAN COOPERATION PROTOCOLS AND WHICH ARE APPLIED IN ALL CENTRES (RESIDENTS WITH PSYCHIATRIC PROBLEMS, WOMEN WHO ARE VICTIMS OF GENITAL MUTILATION,...).

VEP: A VIRTUAL COLLABORATION BETWEEN JAPAN, INDONESIA (BALI), THAILAND AND BELGIUM

INFO WILL FOLLOW



ONLINE SESSIONS

21 OCT. 2022

Friday

PERINATAL CARE IN POLAND

AGNIESZKA BIEŃ & MAGDALENA TRENDS IN MATERNITY CARE IN POLAND

DURING THE PAST THREE DECADES WE HAVE SEEN A HUGE BREAKTHROUGH IN PERINATAL CARE IN POLAND. THE NATIONAL PROGRAM FOR THE IMPROVEMENT OF PERINATAL CARE WAS IMPLEMENTED IN 1993. THE PRIORITY GOAL OF DOCUMENT WAS TO PREVENT THE OCCURRENCE OF COMPLICATIONS RESULTING FROM PREMATURITY. TAKING THE MEASURES SPECIFIED IN THIS PROGRAM LED TO A REDUCTION IN PERINATAL MORTALITY, A DECREASE IN THE NUMBER OF PREMATURE BIRTHS, A REDUCTION IN THE ADVERSE EFFECTS OF MATERNAL AND CHILD DISEASES. THE MATERNAL AND CHILD MORTALITY RATES HAVE DECREASED DRAMATICALLY. IN 1990, THERE WERE 1.6 DEATHS PER 10,000 POPULATION DUE TO CONDITIONS WHICH OCCURED IN THE PERINATAL PERIOD; IN 2013, THE RATE WAS 0.2. IN CONTRAST, THE PERINATAL MORTALITY RATE FELL FROM 19.2 IN 1990 TO 5.6 IN 2019.

IN 2012, THE STANDARD OF MEDICAL PROCEDURE FOR THE PROVISION OF HEALTH SERVICES IN THE FIELD OF PERINATAL CARE PROVIDED TO A WOMAN DURING PHYSIOLOGICAL PREGNANCY, PHYSIOLOGICAL CHILDBIRTH, PUERPERIUM AND CARE FOR A NEWBORN WAS DEVELOPED AND IMPLEMENTED (JOURNAL OF LAWS OF 2016, ITEM 1132). IN 2019 THE DOCUMENT HAS BEEN EVALUATED AS THE ORGANIZATIONAL STANDARD OF HEALTHCARE IN ENTITIES PROVIDING MEDICAL SERVICES IN THE FIELD OF PERINATAL CARE (JOURNAL OF LAWS 2018, ITEM 1756).

THE ORGANIZATIONAL STANDARD OF PERINATAL CARE INDICATES AND ASSIGNS MEDICAL STAFF MODELS OF BEHAVIOR AND FORMULATES GUIDELINES IN ACCORDANCE WITH THE CURRENT MEDICAL KNOWLEDGE AND PROFESSIONAL DEONTOLOGY. ON THE OTHER HAND PATIENTS CAN FIND THERE A LIST OF ACTIVITIES THAT EVERY WOMAN SHOULD PERFORM DURING PREGNANCY, CHILDBIRTH AND THE PUERPERIUM, OR WHICH SHOULD BE PERFORMED BY MEDICAL STAFF.

THE DEVELOPMENT OF THE QUALITY OF PERINATAL CARE WAS MAINLY CAUSED BY THE PROGRESS OF MEDICAL KNOWLEDGE, THE DEVELOPMENT OF TECHNOLOGY FACILITATING DIAGNOSTICS AND TREATMENT, AS WELL AS THE IMPROVEMENT OF THE ORGANIZATION OF CARE.

UNIVERSITY OF RWANDA - RWAMAGANA CAMPUS
SR. M VESTINE NYIRAHABIMANA - RWANDA

INFO WILL FOLLOW



ONLINE SESSIONS

21 OCT. 2022

Friday

TRADITIONAL CHINESE MEDICINE SHI XIN, HANGZHOU NORMAL UNIVERSITY

TRADITIONAL CHINESE MEDICINE IN NURSING IS AN IMPORTANT PART OF TRADITIONAL CHINESE MEDICINE(TCM), WHICH IS CLOSELY INTEGRATED WITH THEORY AND PRACTICE. THE THEORY OF "PREVENTIVE TREATMENT OF TCM" IS THE IDEA OF STRENGTHENING THE BODY, PREVENTING AND TREATING DISEASES WITH STRENGTHENING THE PHYSIQUE AS THE CORE.IT IS THE GUIDE FOR THE PREVENTION AND TREATMENT OF DISEASES OF THE CHINESE NATION FOR MORE THAN 2000 YEARS AND THE TREASURE OF TRADITIONAL CHINESE MEDICINE. THE COURSE MAINLY INTRODUCES BASIC THEORY OF PREVENTIVE TREATMENT OF TCM, TRADITIONAL CHINESE MEDICINE NURSING TECHNOLOGY, AND THE CONNOTATION OF "PREVENTIVE TREATMENT OF TCM"THEORY OF TRADITIONAL CHINESE MEDICINE AND THE APPLICATION STATUS OF PREVENTIVE TREATMENT THEORY IN THE FIELD OF NURSING.



International Week

'Diversity in Care'

17 OCT - 21 OCT 2022

