# The International Society of Nephrology and the Renal Society of Australasia: towards a global impact

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Globally, the majority of people diagnosed with advanced kidney disease (AKD) do not have access to kidney care (Harris et al., 2019). This is, in part, due to a lack of institutional resources and trained personnel such as nurses, general physicians and nephrologists (Jha et al., 2016). Additional factors contributing to the lack of access to kidney care – including dialysis and transplantation – include high costs, inequities, inefficiencies in healthcare delivery, lack of knowledge, and lack of supplies (Ashuntantang et al., 2017; Harris et al., 2019). As such, while an increasing number of low- and lower-middle-income countries (LLMICs) are now offering dialysis, dialysis personnel – particularly nurses and nursing leadership – as well as educational resources are not consistently developed nor available (Mobolaji-Olajide et al., 2018).

The International Society of Nephrology (ISN) is committed to addressing global kidney health. The aim of this editorial is to raise awareness within the Renal Society of Australasia (RSA) of the ISN Kidney Health Professionals Working Group (KHP WG) who advance the mission and vision of the ISN.

Nephrology nurses are the largest professional group responsible for the provision of kidney care internationally. However, limited nephrology nurse training and education, particularly in LLMICs (Mobolaji-Olajide et al., 2018), has meant that nurses in these areas are challenged to provide safe,

quality nursing care – LLMICs record nursing shortages in 60-80% of countries (Bello et al., 2017). Furthermore, once nurses are trained, there are often limited professional development and career paths for them in LLMICs, resulting in loss of trained nurses to higher income countries. There are also limited job opportunities in public hospitals, and remuneration is poor in the private healthcare industry. Nephrology nursing leadership within LLMICs is therefore important to improve management, education, career structures, and ultimately the safety and quality of kidney care (Bennett et al., 2019).

The ISN represents a wide international network within nephrology and has pursued the worldwide advancement of education, science and patient care since 1960. The ISN is also dedicated to addressing the disparity between high-income countries (HICs) and LLMICs in the research, diagnosis, treatment and prevention of kidney disease (Bello et al., 2019). Examples of this are through global partnership programs such as the Educational Ambassadors Program (http://ea.theisn.org) and the Sister Renal Centers Program (http://src.theisn.org/). Both programs connect HICs with LLMIC nephrology individuals and teams, providing education, and nurturing partnerships between participating programs.

However, most ISN activities have been predominantly nephrologist-driven, supporting physician training and

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nephrologist collaboration, with variable involvement of nurses, dietitians, surgeons and technicians (http://ea.theisn. org). In 2017 the society recognised a gap in their support for the non-nephrologist workforce, and therefore set about forming a comprehensive and complementary nursing and allied health professional taskforce in order to encourage nursing involvement in both program delivery and program development. The KHP WG has been a result of this, providing a voice for non-nephrologist professionals throughout the ISN. This has included representation supporting ISN's Continuing Medical Education Committee, Education Working Group, Educational Ambassadors Program, and ISN Regional Boards.

The ISN KHP WG aims to develop links between HIC nursing and allied health professional groups with LLMIC regions. For example, the ISN partnership with the Canadian Association of Nephrology Nurses and Technologists (CANNT) has helped nurses in LLMICs benefit from free subscriptions to the ISN's Academy, its e-learning platform (Bennett et al., 2019). This model encourages nurses to sponsor ISN subscriptions and benefit from a partnership and mentoring between LLMIC and HIC nurses and permits access to online nephrology education materials available on the ISN Academy website (https://academy.theisn.org). The ISN KHP WG would like to develop similar collaboration in the future with other established nursing organisations, including the RSA.

The major objective of the ISN KHP WG is to build capacity among LLMIC nephrology workforce by supporting the creation of sustainable leadership and education programs (Bennett et al., 2019). This objective aligns with the ISN strategic priorities of promoting equitable access to sustainable kidney care, building capacity in healthcare professionals, and connecting community. The inclusion of nurses, dialysis technicians and water experts, dietitians, pharmacists, psychologists, exercise professionals, and social workers will assist the ISN to fulfil its mandate to engage the nephrology community across the globe.

The current ISN KHP WG is reaching out to LLMIC kidney care professionals to support, mentor and facilitate improved leadership and educational resources worldwide. The development of a strong nursing and allied health presence within the ISN will assist the ISN to better meet the needs of people with kidney disease around the globe.

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