STRENGTHENING NURSING AND MIDWIFERY
A vital opportunity to improve health outcomes
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Nurses and midwives make up over half of the healthcare workforce, and in many settings, nurses serve as the sole providers of healthcare. This positions them as critical agents for the advancement of global health and security as well as patient advocacy. There have been increasing calls for a unified voice to advocate for the strategic advancement of nursing and midwifery amidst the evolving challenges in global health, spotlighted by the COVID-19 pandemic. Various reports have been published to meet this need, including the 2018 GAPFON report and the Strategic Directions in Nursing and Midwifery Report (SDNM), published in 2021.

This brief summarizes strategic recommendations and related resources that nursing workforce development bodies can utilize to advance the profession, organized SDNM report’s strategic directions: Education, Jobs, Leadership, and Service Delivery.

**Education:**

- **Priority 1: Align educational pathways of nursing and midwifery with optimized healthcare and academic roles to ensure that midwife and nurse graduates meet or exceed the demands of their health system national health priorities.**
  - Support higher education of nurses and midwives to support the growth of the next generation of nurse teachers and advanced specialists, in order to achieve the country or region’s specific health priorities.
  - Adapt nursing and midwifery curricula to include courses in policy, public health and global health to meet evolving healthcare needs.
  - Advance nursing and midwifery curricula and interventions to mitigate social determinants of health (SDOH) in patient care and prepare them to be effective advocates for health equity.
    - [The Future of Nursing 2020-2030: Charting the Path to Health Equity](#)
    - [American Association of Colleges of Nursing SDOH Toolkit](#)
  - Utilize the skills of nurses and midwives to strengthen primary healthcare and prevent future epidemics.

- **Priority 2: Ensure that countries have sufficient numbers of nurses and midwives and that policies allow for surge capacity in times of crisis to avoid burn-out when nurses are needed most, as was seen in the COVID-19 pandemic.**
  - Prepare future generations of nurse and midwifery researchers equipped to conduct and share evidence-based research.
  - Support research that improves implementation of evidence-based practice into clinical settings to improve quality of care.

- **Priority 3: Structure education programs for nurses and midwives to be competency-based, according to evidence-based teaching styles, meet quality standards and align with demands of population health.**
  - Utilize simulation labs and precepted training with objective, predefined competence measures in nursing and midwifery training.
  - Include comprehensive women’s healthcare in midwifery training.
  - Prepare nurses and midwives to implement and advance evidence-based interventions.
  - Prepare nurses and midwives to advance population health, centering high quality, patient-centered and cost-effective care.

- **Priority 4: Prepare faculty to teach according to the most effective methods and technologies**
  - Address the digital divide that bars access to online training and teaching resources.
**Jobs**

◆ **Priority 1: Plan nurse and midwife workforce development around population needs without compromising safety.**
  - Support investment into nursing and midwifery to improve recruitment, training and retention; this includes making workplaces safer and providing opportunities for career growth.

◆ **Priority 2: Foster demand for jobs in primary healthcare to meet population health priorities.**
  - Remove barriers to pursuing advanced practice degrees to increase population access to safe, effective and affordable care.
    - [The Role of Nurse Practitioners in Healthcare Reform](https://www.nursepractice.org/research/the-role-of-nurse-practitioners-in-healthcare-reform)

◆ **Priority 3: Ethically manage the migration of nurses and midwives.**
  - Follow the WHO [Global Code of Practice on the International Recruitment of Health Personnel](https://www.who.int/nr/healthworker/outcomes/migration_and_education/guidebook/en/)

◆ **Priority 4: Recruit and retain nurses and midwives where they are needed most.**
  - Campaign for a healthy and sustainable nursing and midwifery workforce that protects, retains and empowers nurses and midwives and center efforts to increase diversity to reflect the populations served.
    - WHO [State of the World’s Nursing Report](https://www.worldnursingreport.org/)
    - UN Population Fund [State of the World’s Midwifery Report](https://unpopulation.org/)
  - Ensure that nurses are able to work in a professional environment where their personal security and wellbeing is assured.
    - International Labor Office [Convention on Nursing Personnel](https://www.ilo.org/dyn/normlex/en/f?p=100:113:0::NO::P113_SEARCH_STRING:CONVENTION+ON+NURSING+PERSONNEL-P113_PAGENUMBER:1)

**Leadership**

◆ **Priority 1: Empower nurses and midwives to take on leadership roles to influence health policy and management, including on discussions of health service delivery methods, priorities, and budgetary allocations that focus on safety and efficacy of care.**
  - Develop advanced practice roles and opportunities for leadership in interprofessional healthcare teams.
  - Position nurses and midwives in leadership roles at all levels, including in government ministries, in elected positions, and advocating for Chief Nursing Officers at the national and institutional level.
  - Actively engage nurses in key decision making at the policy tables of national and regional technical working groups, state level governments, ministries of health, NGOs, and other key strategic organizations.
  - Reduce workplace hierarchies by expanding opportunities for collaboration in clinical decision making, professional development, and goal-setting.

◆ **Priority 2: Invest in leadership training and mentorship for midwives and nurses, starting in basic nursing education.**
  - Establish collaborative networks of practice, education and policy development that work across global regions.
    - Global Network of Nursing & Midwifery WHO Collaborating Centers
    - Global Alliance for Nursing and Midwifery
    - African Forum for Research and Education in Health (AFREHealth)
  - Provide mentorship to develop the next generation of leaders in nursing and midwifery, trained to advance global health and nursing/midwifery professions, starting with basic nursing education.
    - Global Health eLearning Center
○ CUGH Capacity Strengthening Platform
○ Use www.cughcapacitybuilding.org to share training needs or material
○ World Health Organization training on mental health for Health Care Workers (HCWs)
  (free of cost, 11 languages)
○ The World Continuing Education Alliance
○ ICAP at Columbia eLearning portal

● Utilize nurses to oversee large scale community health programs and train community health workers (CHWs) as the frontline of health prevention and health promotion service delivery.
● Use and expand existing community-based health programs to promote healthy lifestyles within communities and schools, centering the role of nurses and midwives in the administration of these efforts.
● Document and elevate evidence of the capacity of nurses and midwives to improve health outcomes at all levels.
  ○ ICN Nurses: A Voice To Lead Nursing The World To Health
  ○ The Future of Nursing 2020-2030: The Role of Nurses in Improving Health Care Access and Quality
  ○ Effectiveness of midwifery-led care on pregnancy outcomes in low- and middle-income countries

Service Delivery
◆ Priority 1: Strengthen the regulatory mechanisms that protect nurses in their work environments including minimum standards for timely, adequate access to PPE.
◆ Priority 2: Adapt workplace policies to elevate nurses and midwives as leaders in interdisciplinary teams and in ensuring safe work environments, during times of crisis and relative normalcy.
  ● Develop, share, and utilize evidence to inform best practices in nursing and midwifery and shape health policy.
Additional References
