



Nurses at the forefront of COVID-19 pandemic

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A new coronavirus referred to as COVID-19 was first detected in human in Wuhan, China in December 2019, affected many countries and became a pandemic across the world on March 11, 2020 (Salzberger et al., 2020). COVID-19 infection ranges from uncomplicated upper respiratory tract infection to severe viral pneumonia with multiorgan failure and death endangering public life and socio-economic development in many countries (Munster et al., 2020). The World Health Organization (WHO, 2020) declared this situation as a public health emergency of international concern and implemented varied levels of containment in order to reduce disease transmission. Chaudhry et al (2020) reported that some evidence suggested strict social distancing may limit spread of this novel pathogen. Screening and isolation of infected individuals, travel restrictions, contact tracing, quarantine measures and closure of non-essential businesses as well as schools and universities were implemented to reduce the spread of infection (Hartley & Perencevich, 2020). Through the WHO Emergency Medical Teams Initiative (2019), health care workers are trained to better support their own countries to respond to this pandemic. In particular, nurses have an important role to play in meeting the health care needs of the people. Worldwide, nurses are contributing immensely to the global health and well-being of the people, their family and the community wherever they work either in acute care hospitals, aged care facilities or community public health

settings. They are always called upon to respond to help during disasters and other environmental calamities. The recent outbreak of coronavirus is one such example where our nurses around the world are called upon to respond immediately to the call for help during this pandemic. Guided by the World Health Organisation and the International Council of Nurses on how nurses worldwide can contribute to the global health and welfare of the people in need of their help, nurses have set aside their own protection to be at the forefront among other healthcare professionals in mitigating the spread of this infectious disease. Similar to Florence Nightingale in her work during the Crimean War, where she also instigated infection control, nurses are facing this battle similar to her.

The global nursing workforce is 27.9 million indicating an increase of 4.7 million nurses over the period 2013–2018. This confirms that nursing is the largest occupational group in the health care sector, accounting for approximately 59% of the health professions. However, global shortage of nurses in 2018 was 5.9 million and out of this shortage, WHO (2020) reported that 5.3 million nursing shortage was found in low- to middle-income countries barely keeping pace with the population growth. With the COVID-19 pandemic, these countries are currently severely affected and in need of nursing and medical support. COVID-19 as a complex pandemic is challenging the evolving roles of nurses in delivering safe and quality health care. It is timely to highlight the ten key actions in the WHO State of the World Nursing Report (2020, pp xviii-xx) as follows:

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1. Countries affected by shortages will need to increase funding to educate and employ at least 5.9 million additional nurses.
2. Countries should strengthen capacity for health workforce data collection, analysis and use.
3. Nurse mobility and migration must be effectively monitored and responsively and ethically managed.
4. Nurse education and training programmes must graduate nurses who drive progress in primary health care and universal health coverage.
5. Nursing leadership and governance is critical to nursing workforce strengthening.
6. Planners and regulators should optimize the contributions of nursing practice.
7. Policy-makers, employers and regulators should coordinate actions in support of decent work.
8. Countries should deliberately plan for gender-sensitive nursing workforce policies.
9. Professional nursing regulation should be modernized.
10. Collaboration is key.

The year 2020 also marks the special significance in celebrating the Year of the Nurse and Midwife with the focus on nurses being at the forefront for health policy and practice. As nurses work alongside other health care disciplines in providing care for the COVID-19 increasing cases and deaths around the world, they have a critical role in infection prevention and control in primary, community and acute care settings. However, nurses face potential risk of infection as well as work-related anxiety, mental health problems and burnout (Aldohyan et al., 2019). Highly stressed nursing staff were found due to the increased volume and intensity of their work and implementing newly developed COVID-19 protocols, and facing more rapid deterioration of their patients (Jackson, et al., 2020). Nurses need practical and psychological support to be able to work in this “new normal” clinical environment. Ensuring that nurses are provided with sufficient personal protective equipment, continuing education, counselling service, enough rest between shifts are essential.

Occupational and organisational preparedness to deal with the pandemic need to be in place. Nurse managers and leaders have a role to play to support nurses and the organisation. They need to acknowledge the physical and emotional impact of the pandemic specifically their nurses’ concerns for personal and family safety, their fears, vulnerability and psychological issues. Clear and honest communication in ensuring access to physiological, psychological and safety needs of the nurses are one of their important roles of nurse managers (Billings et al., 2020). With an effective interdisciplinary team collaboration and the support of the government of each country, this pandemic can be stopped so that we can all go back to a virus-free country.

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