



# LINKS

NURSING & MIDWIFERY



VOLUME 17

Official Publication of  
The Global Network of World Health Organization  
Collaborating Centres for Nursing and Midwifery



**UTS**

UNIVERSITY  
OF TECHNOLOGY  
SYDNEY

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Boa Vista, March, 2023 – In the north of Brazil - Therapeutic milk (water, powdered milk, sugar, oil, electrolyte, and micronutrient solution) for malnourished children. As a strategy to increase acceptance of this milk among the Yanomami, local foods such as açai and banana were included in the formula. The involvement of INDIGENOUS health agents helped in the process.

Cover photo © Pan American Health Organisation by Karina Zambrana/MS/OPAS/OMS/WHO

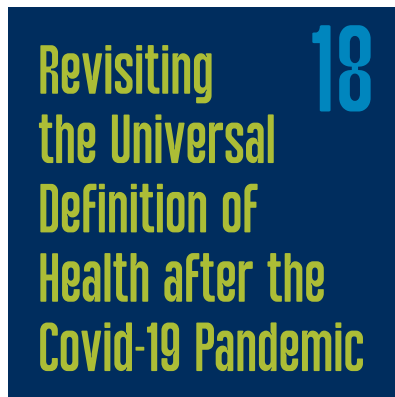


“The Pan American Health Organization PAHO has been providing technical support in the response to the emergency since 15 January, when a PAHO team participated in an investigative mission to deepen the understanding of the situation and identify emergency health care needs.”



photo © Pan American Health Organisation by Karina Zambrana/MS/OPAS/OMS/WHO

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As GNWHOCNM Secretariat 2022-2026, The WHO Collaborating Centre for Nursing, Midwifery, and Health Development at the University of Technology, Sydney (WHO CC UTS) will support the vital and ongoing activities of Network partners, institutions, and Collaborating Centres around the world to improve lives and make positive and lasting change by strengthening connections, partnerships, collaboration and communication between Collaborating Centres and key institutional stakeholders.

We look forward to working closely with all Nursing and Midwifery Collaborating Centres globally throughout our tenure as Secretariat to support and accelerate strategic collaboration in partnership. Please do not hesitate to contact us if you have any queries, comments, recommendations, or input to the magazine.

We look forward to hearing from you.  
Thank you! - WHO CC UTS Secretariat



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We would like to express our gratitude to **Chris Rossiter** for contributions to the completion of LINKS Vol17

# Meet the Secretariat



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# Editorial

Welcome to Volume 17 of LINKS Magazine, 2024. The Secretariat extends its heartfelt gratitude to the WHO Collaborating Centres for Nursing and Midwifery, whose collective efforts are pivotal in advancing these vital fields globally. We are immensely thankful for your ongoing support and engagement.

This issue amplifies the voice of our community, featuring contributions from you, our esteemed global partners, and colleagues. LINKS Magazine is going from strength to strength, with increased engagement and views with each volume. The Global Network's mission is to harness the potential of Nursing and Midwifery to promote Health for All, in collaboration with WHO, member states, Centres, NGOs, and other stakeholders committed to promoting the health of populations. In addition to fostering collaboration and communication between members, the network aims to carry out advocacy and evidence-based policy activities within the framework of the WHA, regional resolutions, and WHO Programs of work, and in alignment with the WHO Strategic Directions in Nursing and Midwifery (SDNM) Policy Priorities 2021-2025: Education, Jobs, Leadership, and Service Delivery.

We are excited to showcase the Region of the Americas in this volume, underscoring the diverse contributions of WHO PAHO/AMRO Collaborating Centres for Nursing and Midwifery. This edition also highlights Dr Silvia Cassiani, PAHO/AMRO regional advisor for nursing and allied health technicians, and her dedicated inputs to Nursing and Midwifery throughout her tenure. This edition promises to offer a wealth of information, insights, and inspiration to our valued Collaborating Centres and Partners.

Within this edition, we spotlight educational advancements, innovative practices, and initiatives aimed at ensuring equitable care for vulnerable populations. These endeavours signify substantial progress toward fulfilling our strategic objectives.

As we embark on this new year, we extend our deepest appreciation and warm wishes for your continued success and dedication to advancing healthcare globally.

With gratitude,

**Professor,  
Debra Anderson**

Co-Secretary General,  
Global Network of WHO  
CCs for Nursing and  
Midwifery

Dean, Faculty of Health,  
University of  
Technology Sydney



# GNWHOCCNM 2022-2026

## Global Network of WHO Collaborating Centres for Nursing and Midwifery

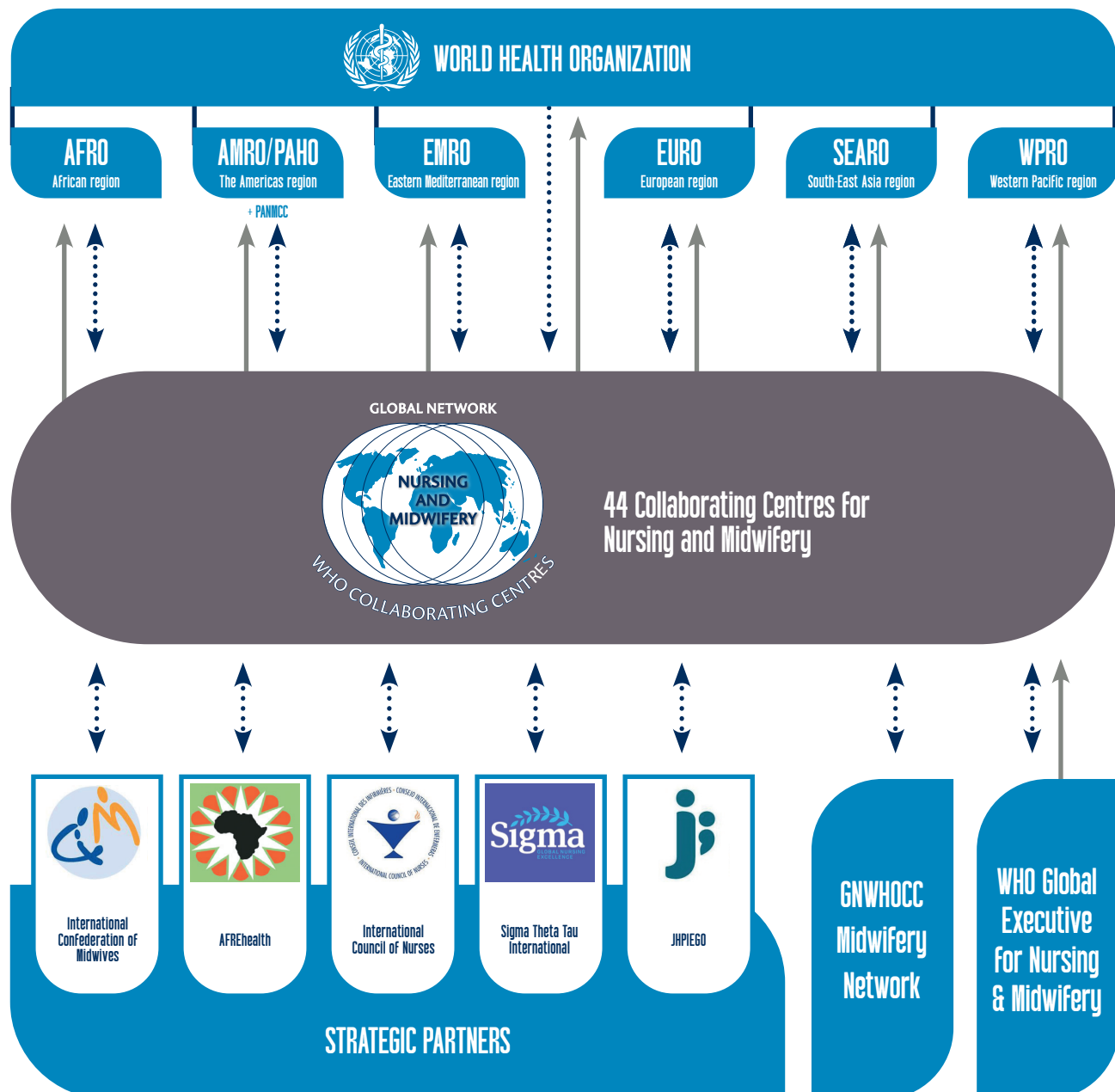
The Global Network of WHO Collaborating Centres for Nursing and Midwifery (GNWHOCCNM) was first formed between 1987-1988. It is an independent, international, not-for-profit, voluntary organization comprising WHO CCs across all six WHO Regions. For 35 years, the network has worked to strengthen and promote nursing and midwifery leadership, education, practice, and research towards the goal of 'Health for All'.

The Mission of the Global Network is to maximize the contributions of nursing and midwifery to advance Health for All in partnership with WHO and its member states, member centres, NGOs, and others interested in promoting the health of populations. In addition to fostering collaboration and communication within the nursing and midwifery global community, the network will

carry out advocacy and evidence-based policy activities within the framework of the World Health Assembly (WHA), regional resolutions, and WHO Programs of Work, and in alignment with the WHO Strategic Directions in Nursing and Midwifery (SDNM) Policy Priorities 2021-2025.

WHO CC UTS was elected Secretariat of the GNWHOCCNM in 2022, following the 2018-2022 tenure of John Hopkins University in Baltimore, Maryland. WHO CC UTS seeks to further the vision and mission of the Global Network of WHO CC by being a reliable source of communication, community, and collaboration between Global Network CCs and partners.

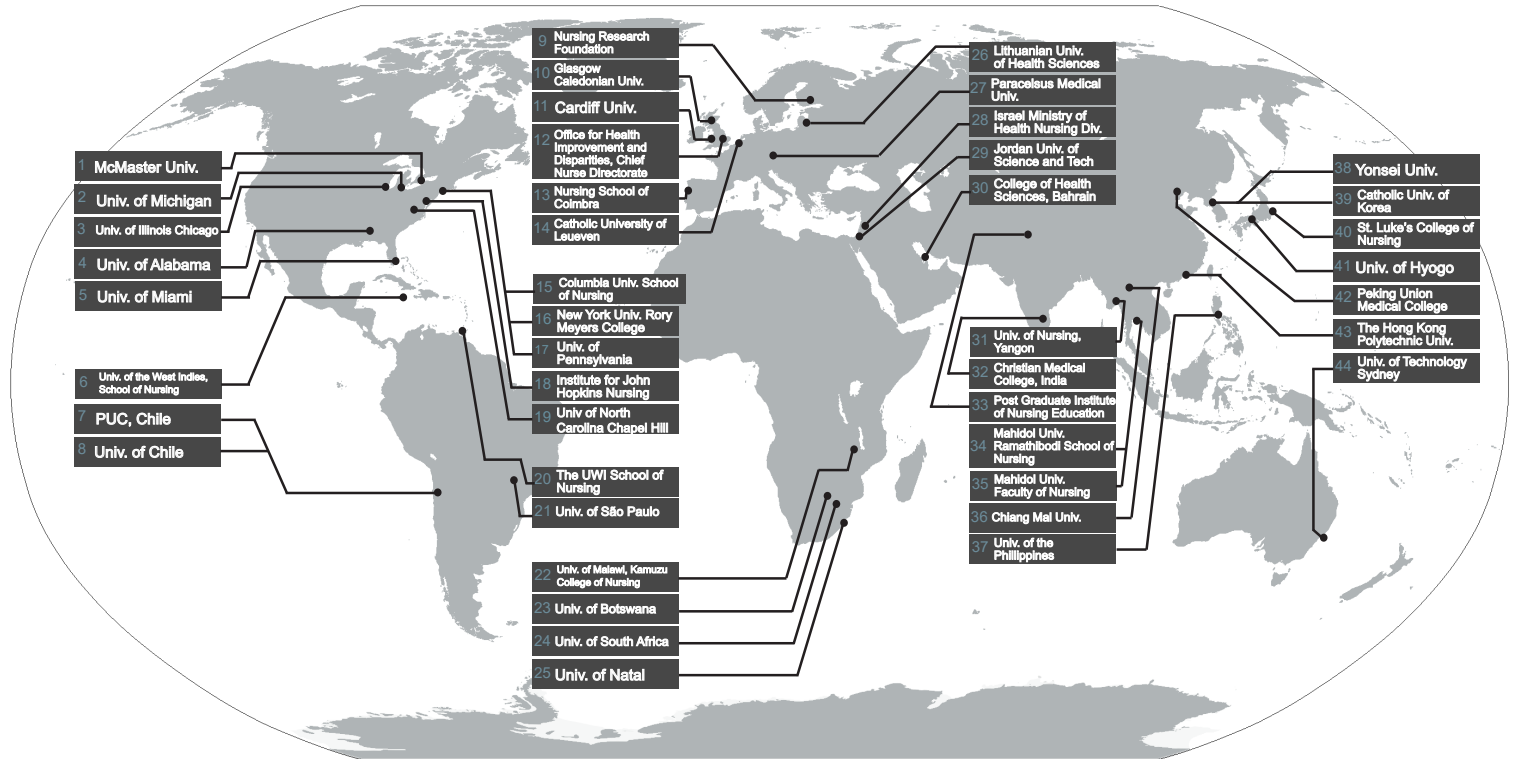
The relationship of the GNWHOCCNM with WHO, WHO Regional Offices, and key strategic partners is illustrated below:





# Global Network of WHO Collaborating Centers

The Global Network is Currently Comprised of 44 Collaborating Centres for Nursing and Midwifery.



1. McMaster University, Hamilton, Canada (CAN39)
2. University of Michigan, School of Nursing, Office of International Affairs, Ann Arbor, USA (USA 283)
3. University of Illinois at Chicago, Chicago, USA (USA193)
4. University of Alabama at Birmingham, School of Nursing, Birmingham, USA (USA241)
5. University of Miami, School of Nursing and Health Studies, Miami, USA (USA349)
6. University of the West Indies, School of Nursing Mona, Kingston, Jamaica (JAM15)
7. Pontifical Catholic University of Chile, Santiago, Chile (CHI19)
8. University of Chile, Santiago, Chile (CHI18)
9. Nursing Research Foundation, Helsinki, Finland (FIN19)
10. Glasgow Caledonian University, Department of Nursing and Community Health, Glasgow, Scotland (UNK160)
11. Cardiff University, College of Biomedical and Life Sciences, School of Healthcare Sciences, Cardiff, Wales (UNK276)
12. Office for Health Improvement and Disparities, Chief Nurse Directorate, London, United Kingdom (UNK277)
13. Nursing School of Coimbra, Coimbra, Portugal (POR14)
14. Catholic University of Leuven, Leuven, Belgium (BEL51)
15. Columbia University, School of Nursing, New York, USA (USA272)
16. New York University, Rory Meyers College of Nursing, New York, USA, (USA202)
17. University of Pennsylvania, School of Nursing, Philadelphia, USA (USA206)
18. Johns Hopkins University, School of Nursing, Baltimore, USA (USA297)
19. University of North Carolina at Chapel Hill, School of Nursing, Chapel Hill, USA (USA461)
20. University of the West Indies at St. Augustine, School of Nursing, St. Augustine, Trinidad and Tobago (TRT1)
21. University of São Paulo, College of Nursing at Ribeirão Preto, São Paulo, Brazil (BRA32)
22. University of Malawi, Kamuzu College of Nursing, Lilongwe, Malawi (MAL3)
23. University of Botswana, Gaborone, Botswana (BOT3)
24. University of South Africa, University of South Africa, Department of Health Studies, Pretoria, South Africa (SOA14)
25. University of Natal, School of Nursing, Durban, South Africa (SOA13)
26. Lithuanian University of Health Sciences, Kaunas, Lithuania (LTU4)
27. Paracelsus Medical University, Institute of Nursing Science and Practice, Salzburg, Austria (AUT15)
28. Israeli Ministry of Health, Nursing Division, Jerusalem, Israel (ISR32)
29. Jordan University of Science and Technology, Irbid, Jordan (JOR16)
30. University of Bahrain, College of Health and Sport Sciences, Manama, Bahrain (BAA1)
31. University of Nursing Yangon, Yangon, Myanmar (MMR4)
32. Christian Medical College and Hospital, Vellore, India (IND138)
33. National Institute of Nursing Education, Postgraduate Institute of Medical Education and Research, Chandigarh, India (IND140)
34. Ramathibodi School of Nursing, Faculty of Medicine Ramathibodi Hospital, Mahidol University, Bangkok, Thailand (THA35)
35. Mahidol University, Faculty of Nursing, Bangkok, Thailand (THA34)
36. Chiang Mai University, Faculty of Nursing, Chiang Mai, Thailand (THA43)
37. University of the Philippines Manila, Manila, Philippines (PHL13)
38. Yonsei University, College of Nursing, Seoul, Republic of Korea (KOR16)
39. Catholic University of Korea, College of Nursing, Research Institute for Hospice and Palliative Care, Seoul, Republic of Korea (KOR104)
40. St. Luke's International University, College of Nursing, Tokyo, Japan (JPN58)
41. University of Hyogo, Research Institute of Nursing Care for People and Community, Kobe, Japan (JPN77)
42. Peking Union Medical College, School of Nursing, Beijing, China (CHN129)
43. The Hong Kong Polytechnic University, Faculty of Health and Social Sciences, School of Nursing, Hong Kong, China (CHN89)
44. University of Technology Sydney, Sydney, Australia (AUS93)

# PAHO/AMRO Regional Advisor for Nursing and Allied Health Technicians, Dr. Silvia Cassiani, Retires

*By Silvia Helena De Bortoli Cassiani*

Since 2013, I have been the regional advisor for nursing and allied health technicians in the Human Resources Unit for Health, Health System and Services Department in the Pan American Health Organization (PAHO). (Just a note that midwifery and maternal health are coordinated by the Latin American Center for Perinatology, Women and Reproductive Health.) Previously, I was a faculty member at the Ribeirao Preto College of Nursing, University of Sao Paulo in Brazil, a PAHO/WHO Collaborating Center since 1988. PAHO is older than WHO so it was allowed to continue to use PAHO in the Center's title.

In 2023, PAHO approved the Resolution Policy on the Health Workforce 2030: Strengthening Human Resources for Health to Achieve Resilient Health Systems. The Resolution urges countries to develop and consolidate regulatory mechanisms for organizing their human resources for health, education and licensing processes, and professional practice; to strengthen interprofessional teams based on primary health care, especially in underserved areas; to enhance workforce capacity-building; to promote decent working conditions and to develop information systems and reporting of labor mobility in accordance with the WHO Global Code of Practice on the International Recruitment of Health Personnel.

The Region of the Americas has around seven million nursing professionals, representing 56% of the health workforce; 87% of them are women. The Region produces 81.2 nursing graduates per 100,000

inhabitants. Poor distribution of professionals within and between countries, continuous and increasing

**The Region of the Americas has around seven million nursing professionals, representing 56% of the health workforce; 87% of them are women**

migration, unsafe and unattractive working conditions, uncompetitive salaries, and the lack of professional compliance or regulation prevent nursing professionals from using their full capacity to improve health outcomes for the population.

There are more than 2,500 nursing schools, according to the PAHO Directory of Schools of Nursing in the Region of the Americas, many of them concentrated in two countries: Brazil and United States of America. Latin America and the Caribbean countries must increase the number of nurses with postgraduate level qualifications, particularly educators, and we have been reinforcing regional collaborative efforts to prepare more nurses at this level.

Since 2013, PAHO has also promoted initiatives to encourage the expansion of advanced practice nurses, especially in Latin American countries where there is

no recognition of this role in either job title or education. Advanced practice nurse is defined by PAHO as a professional with an advanced degree who, integrated into the interprofessional team of first-level health care services, contributes to management of the care of patients/clients with mild acute diseases and diagnosed chronic disorders, under the guidance of clinical protocols or guidelines. To discuss and implement these roles in Latin America, PAHO has promoted events, published official documents and scientific articles, and engaged in several activities with our Collaborating Centers and other partners.

In 2019, the Strategic Directions for Nursing in the Region of the Americas provided strategic guidance for the advancement and strengthening of nursing in health systems and services. It proposed the following actions:

- strengthening and consolidating leadership and strategic management of nursing in the context of health systems and in policy-making and monitoring;
- addressing the working conditions and capacities of nurses to expand access and coverage with equity and quality, in order to promote a people-, family-, and community-centered model of care and to strengthen both the primary level of care and integrated health services networks;
- and improving the quality of nursing education.



Several initiatives were taken to increase communication with nurses and chief nursing officers such as the En Americas list serv that now reaches 38,000 nurses, the development of the Regional Community of Practice with the WHO Nursing and Midwifery Global Community, a complete nursing website in the PAHO website, regional meetings, several webinars, and the annual May celebration of the International Nurses Day. For 2024 the theme is Gender, Leadership and Education in Nursing.

One of PAHO's guidelines is to work together with WHO/PAHO collaborating centers. Today, in this Region, there are 12 collaborating centers on nursing and midwifery. The centers collaborate in an important way in implementing nursing program initiatives. The network of PAHO/WHO CCs organizes biannual Pan American Colloquiums on Nursing Research, which have been held since 1988. This year the Colloquium will be held on November 6-8 in Santiago and is organized by the PAHO/WHO CC in the Pontificia Universidad Cattolica de Chile. We hope to see you all there!

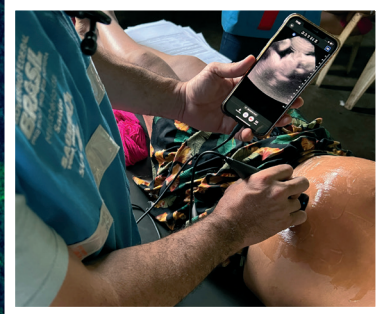
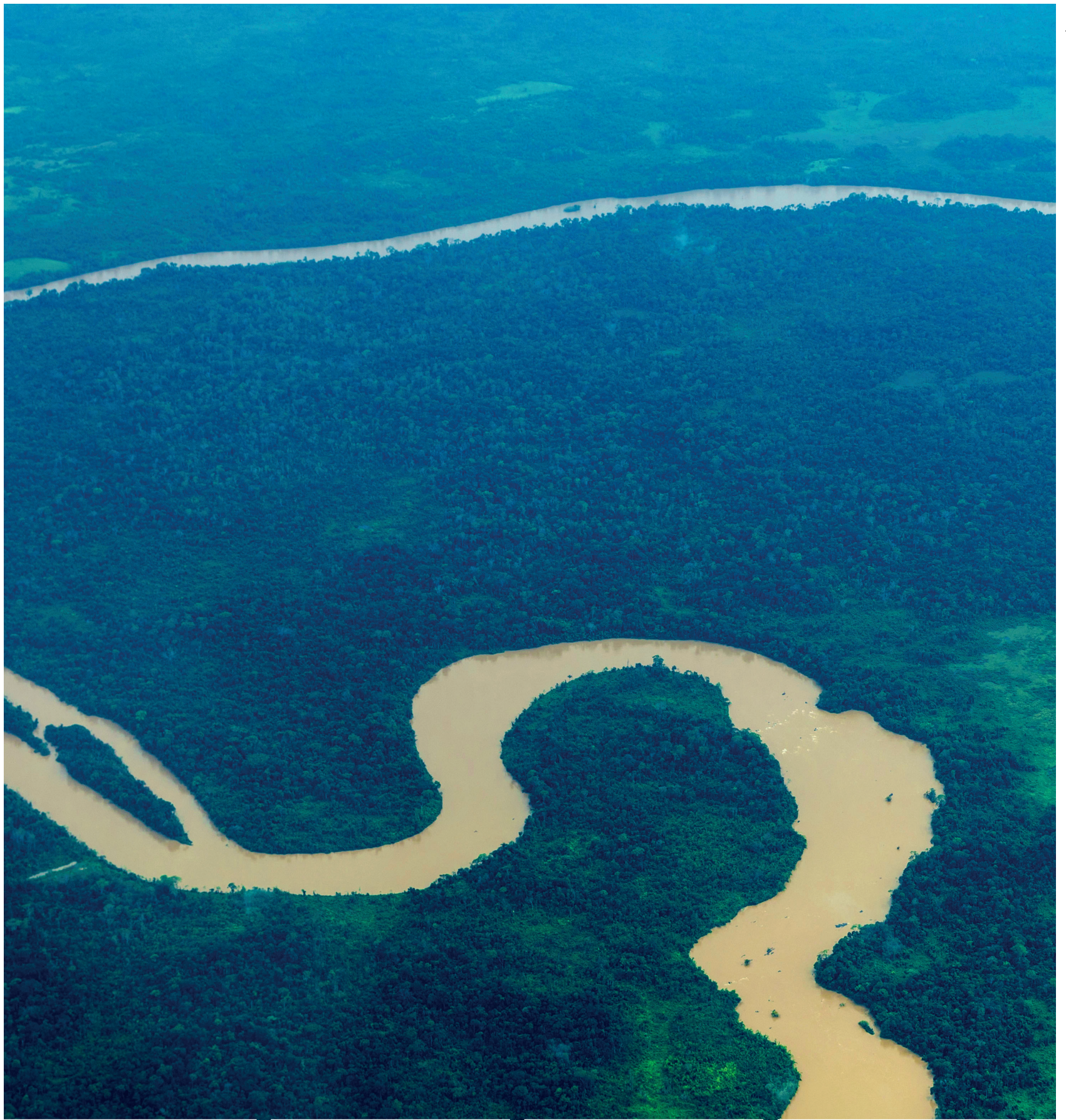
# PAHO/WHO



**Silvia Helena De Bortoli Cassiani**  
*Regional Advisor for Nursing and  
Allied Health Technicians*

Pan-American Health Organization -  
Washington DC.

Since 2013, PAHO has also promoted initiatives to encourage the expansion of advanced practice nurses, especially in Latin American countries



Pan American Health Organisation's  
- OPAS works in technical cooperation with Brazil to  
improve the health of the Yanomami indigenous people

The Yanomami Indigenous Land is an area of 96,650 km<sup>2</sup> that is equivalent to the combined territories of Haiti, Jamaica, Puerto Rico and the Dominican Republic. Local population of 31 mil inhabitants.

Reaching the Yanomami is a challenging task – 98% of access to the communities needs to be done by air and the remaining 2% are by land. Furthermore, logging and illegal mining actions have prejudiced, actions of the area for two years, including contamination by mercury and other heavy metals, which - according to the Brazilian Ministry of Health - affected not only the rivers of the region, but also the soil and the animals, impacting directly on indigenous food, which is mainly composted for fishing, hunting, collecting fruits and roots, in addition to agriculture.

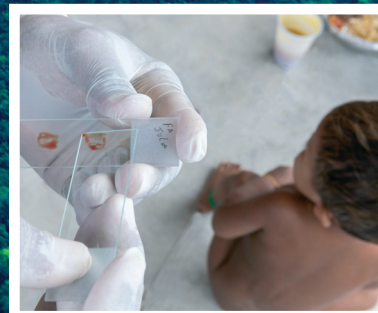
This scenario aggravated cases of malnutrition, acute respiratory infection, diarrhea, malaria and tungiasis (bicho-do-pé) in this population.

To support the response to the emergency, the Pan-American Health Organization (OPAS) has cooperated technically with the Ministry of Health of Brazil since January and participated in the exploratory mission that allowed for a deeper diagnosis of this situation and raised the subsidies for emergency health assistance.



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PAHO Brazil office  
- March 8, 2023

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# NURSES & MIDWIVES

account for more than half  
the professional health workforce

According to WHO State of World's Nursing and Midwifery Report (2020 & 2021), nurses and midwives account for more than half the professional health workforce. In some regions for example Western Pacific they account for as much as 73% of the professional health workforce.

Nurses and midwives bring people-centred care to the communities where they are needed, helping to improve health outcome and deliver cost-effective services.

An estimated 10 million more health workers, primarily in middle to low-income settings, will be needed to attain effective coverage to ensure healthy lives for all by 2030.\*

## WHO Strategic Directions in Nursing and Midwifery



Midwife and nurse graduates have the requisite knowledge, competencies and attitudes to meet national health priorities



Increase the availability of health workers by sustainably creating jobs, effectively recruiting and retaining nurses and midwives



Increase the proportion and authority of midwives and nurses in senior health and academic positions



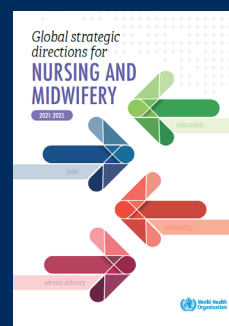
Midwives and nurses work to the full extent of their education and training in safe and supportive service delivery environments

## “Progress towards Universal Health Coverage and the UN Sustainable Development Goals (SDGs) by ensuring equitable access to health workers within strengthened health systems”



17 Goals to transform Our World. The Sustainable Development Goals are a call for action by all countries - poor, rich and middle-income - to promote prosperity while protecting the planet. They recognize that ending poverty must go hand-in-hand with strategies that build economic growth and address a range of social needs including education, health, social protection, and job opportunities, while tackling climate change and environmental protection.

[Read more here.](#)



“The WHO Global Strategic Directions for Nursing and Midwifery (2021-2025)”  
[Read more here.](#)

**HEALTH FOR ALL**  
UNIVERSAL HEALTH COVERAGE

Universal Health Coverage means everyone can access quality health services without financial hardship.  
[Read more here.](#)



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**“I think we have the power in our hands together - nurses, midwives, associations, member states, [ministries of health] and governments - to change the future for tomorrow, for the profession, for universal health to the population ensuring safe and quality care. That’s why we have to do it.”**

**- Dr Amelia Latu**  
Afuhaamango Tuipulotu, WHO Chief Nursing Officer  
*In her first interview with Nursing Times*



## Future Leaders Group

# Shaping the Future of Nursing, Midwifery and Healthcare

The World Health Organization (WHO) has established the Nursing and Midwifery Global Community of Practice (NMGCoP) as a virtual platform to facilitate collaboration, knowledge sharing, and leadership development among nurses and midwives globally. This initiative includes a Future Leaders Group (FLG) dedicated space to engaging early career professionals for exchanging ideas and experiences and offering mentorship initiatives.

In an era marked by complex health challenges, the Future Leaders Group acts as a hub for the exchange of ideas and practices, enabling its members to keep updated on cutting-edge developments in

nursing, midwifery and healthcare. Through discussions, and collaborative projects, the group facilitates the professional growth of its members, preparing them to address the dynamic needs of modern healthcare systems.

To inspire and empower aspiring nurses and midwives, initiatives have been undertaken to produce engaging videos and webinars. This includes the People in the Spotlight series featuring interviews with influential leaders and notable figures in nursing and midwifery. These dialogues accumulated nearly 500 views and seek advice from prominent individuals to share with those embarking on their careers.

Here are some of the competent and empowered future leaders shaping the future and contributing to the achievement of Universal Health Coverage and the Sustainable Development Goals.

### Join us:

Future Leaders | Nursing  
and Midwifery Global  
Community of Practice



# Nurses and Midwives together: a force for global health



**Ahmed Gamal Sallam**  
*EMRO Representative from Egypt*

**“Empowered by Mentorship,  
Shaping Leaders for Healthcare  
Innovation and Positive Change”**



**Mahfuja Jhumu**  
*SEARO Representative from Bangladesh*

**“Never surrender,  
keep toiling, and triumph over  
any challenge”**



**Pilar Lozano González**  
*Consultant on  
leadership development  
for early career nurses  
and midwives  
from Spain*

**“If we aspire to achieve universal health  
coverage, we must invest in nurses and  
midwives. The first step towards this goal  
is for nurses and midwives to invest in  
themselves and empower one another.”**



**Benedicte Molnes**  
*EURO Representative - President of  
the European Nursing Student Association*

**“Recognizing our leadership impact,  
we guide personal growth, support  
colleagues, and advocate for a brighter  
future in healthcare”**



**Jennifer Gaver**  
*AMRO-PAHO Representative  
from the United States of America*

**“Empowered by the Future Leaders  
Group, I’ve connected with inspiring  
professionals worldwide, growing as an  
early-career nurse”**

# WHO Nursing and Midwifery Collaborating Centres Align their Work to Strategic Directions

A recent survey of WHO Collaborating Centres worldwide shows how their vital work aligns with the four priority areas outlined in the WHO Strategic Directions for Nursing and Midwifery (SDNM) 2021-2025. To date, 39 of the 43 centres that make up the Global Network of WHO Collaborating Centres on Nursing and Midwifery (GNWHOCNM) have participated in the survey, from all WHO regions.

WHO Collaborating Centres reported on their activities and how these meet the policy priority areas of the SDNM ( see facing page). The SDNM presents evidence-based practices and an interrelated set of policy priorities that can help countries ensure that midwives and nurses optimally contribute to achieving universal health coverage and other population health goals. It was developed in response to Decision WHA73(30) which requested WHO, “to engage with all WHO regions to update the Global Strategic Directions for Nursing and Midwifery 2016–2020 and, following consultations with Member States, submit this update to the Seventy-fourth World Health Assembly for its consideration.”

The survey of the 39 Collaborating Centres indicates that their work contributes particularly to the domains of leadership and education for nurses and midwives. Some centres are actively working towards all or most of the priority areas in all four domains, also including jobs and service delivery.

## Leadership Priorities

Nearly all WHO CCs undertake activities satisfying the first priority area under Leadership: Establish and strengthen senior leadership positions for nursing and midwifery workforce governance and management and input into health policy. Nearly half reported that their work also fulfilled the second priority area in this domain: Invest in leadership skills development for midwives and nurses.

## Education Priorities

WHO CCs are actively involved in most Education priority areas. Between 85% and 90% undertook activities that promoted three priorities, specifically: 1: Align the levels of nursing and midwifery education with optimized roles within the health and academic systems; 3: Design education programmes to be competency-based, apply effective learning design, meet quality standards, and align with population health needs and 4: Ensure that faculty are properly trained in the best pedagogical methods and technologies, with demonstrated clinical expertise in content areas. Nearly one half are also working towards Priority 2: Optimize the domestic production of midwives and nurses to meet or surpass health system demand.

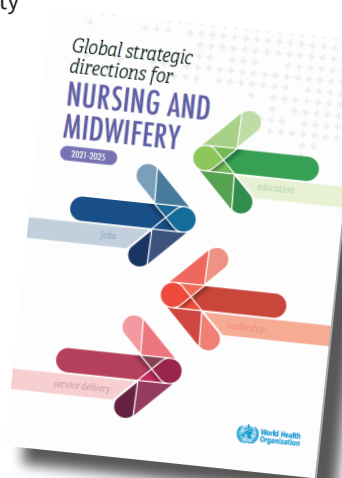
## Service Delivery Priorities

Three quarters of the GNWHOCNM members surveyed are satisfying the first priority under the Service Delivery domain: Review and strengthen professional regulatory systems and support capacity building of regulators, where needed. However, just under one half reported activities that meet Priority 2: Adapt workplaces to enable midwives and nurses to maximally contribute to service delivery in interdisciplinary health care teams.

## Jobs Priorities


WHO CCs are also involved in activities related to the nursing and midwifery workforce development. Around one half are working on activities to further both Priority Area 1: Conduct nursing and midwifery workforces planning and forecasting through a health labour market lens and Priority Area 4: Attract, recruit and retain midwives and nurses where they are most needed. However, fewer WHO CCs were involved in Priority Area 2: Ensure adequate demand (jobs) with respect to health service delivery for primary health care and other population health priorities (approximately one in ten WHO CCs) and Priority Area 3: Reinforce implementation of the WHO Global Code of Practice on the International Recruitment of Health Personnel (approximately one in four).

Full details of the survey of GNWHOCNM members will be shared in future.





# WHO Global Strategic Directions for Nursing and Midwifery

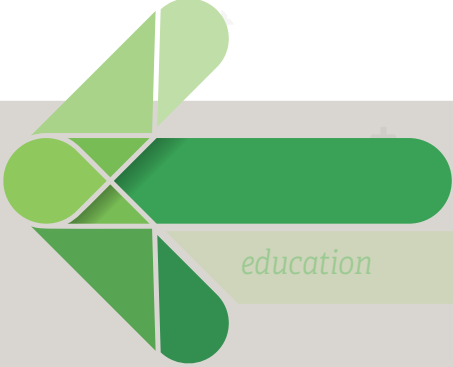


*jobs*

**Strategic direction for jobs:**  
Increase the availability of health workers by sustainably creating nursing and midwifery jobs, effectively recruiting and retaining midwives and nurses, and ethically managing international mobility and migration.

**Policy priority**

1. Conduct nursing and midwifery workforces planning and forecasting through a health labour market lens.
2. Ensure adequate demand (jobs) with respect to health service delivery for primary health care and other population health priorities.
3. Reinforce implementation of the WHO Global Code of Practice on the International Recruitment of Health Personnel.
4. Attract, recruit and retain midwives and nurses where they are most needed..

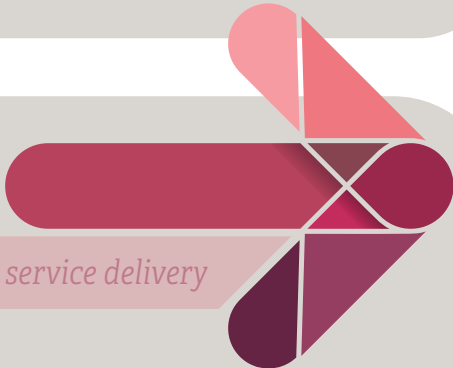


*education*

**Strategic direction for education:**  
Midwifery and Nursing graduates match or surpass health system demand and have the requisite knowledge, competencies and attitudes to meet national health priorities.

**Policy priority**

1. Align the levels of nursing and midwifery education with optimized roles within the health and academic systems.
2. Optimize the domestic production of midwives and nurses to meet or surpass health system demand.
3. Design education programmes to be competency based, apply effective learning design, meet quality standards, and align with population health needs.
4. Ensure that faculty are properly trained in the best pedagogical methods and technologies, with demonstrated clinical expertise in content areas.



*service delivery*

**Strategic direction for service delivery:**  
Midwives and nurses work to the full extent of their education and training in safe and supportive service delivery environments.

**Policy priority**

1. Review and strengthen professional regulatory systems and support capacity building of regulators, where needed.
2. Adapt workplaces to enable midwives and nurses to maximally contribute to service delivery in interdisciplinary health care teams.



*leadership*

**Strategic direction in leadership:**  
Increase the proportion and authority of midwives and nurses in senior health and academic positions and continually develop the next generation of nursing and midwifery leaders.

**Policy priority**

1. Establish and strengthen senior leadership positions for nursing and midwifery workforce governance and management and input into health policy.
2. Invest in leadership skills development for midwives and nurses.

The Global Network of WHO Collaborating Centres for Nursing and Midwifery is an independent international not-for-profit network of Collaborating Centres from WHO's six regions, focusing on nursing and midwifery. Founded in 1988, the Network supports WHO's efforts toward universal health coverage.



By Chinwendu Felicia Agu  
(MSc.N, BScN. RN, RM, R.OPHN)



after the Covid-19 Pandemic

# THINKING MY THOUGHT

“Health is not a ‘complete’ state but ongoing and is dynamic not static; it varies from person to person depending on their unique situation”

Health is a dynamic state along the illness-wellness continuum

## Introduction

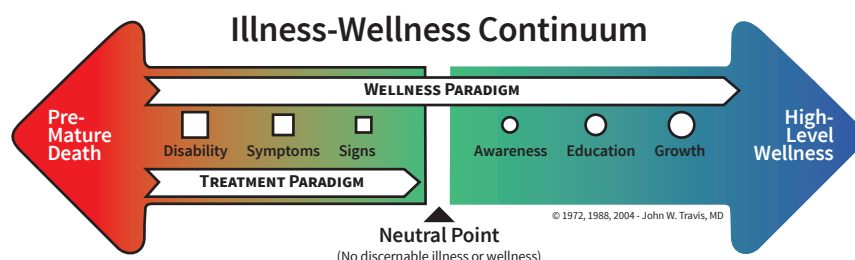
Health is considered to be one of the most important life domains, valued by everyone; hence the definition of health has evolved over time. An initial definition of health was based on the body’s ability to function. Health was seen also as a state of a person’s normal functioning that could be disturbed from time to time by disease. In 2011, Huber and colleagues recommended changing the definition of health to emphasise the ability to adapt and self-manage in the face of social, physical, and emotional challenges given the rise in chronic diseases (Huber et al, 2011).

Coronavirus disease (COVID-19) is a novel infectious disease caused by a newly discovered coronavirus. COVID-19 is not just a public health crisis, but a crisis that affected every sector including economy, education, industry, agriculture, transportation to mention but a few. The Director General of the World Health Organization (WHO) declared COVID-19 a pandemic in a media briefing on March 11 2020, pointing to over 118,000 cases of the coronavirus illness in over 110 countries and territories around the world and the sustained risk of further global spread (WHO, 2020). The emergence of COVID-19 at the end of 2019, and declaration of a pandemic in the early part of 2020 changed the way things are done globally even within and between individuals, families, communities; within and between countries. Specifically, everything concerning health and wellbeing has changed radically and significantly.

## Health definition

In 1948 the World Health Organization defined health as “a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity” (WHO, 1948). Although this definition was accepted globally by most healthcare professionals as being encompassing, it was also criticized as being vague, broad, not measurable and not achievable (Jadad & O’Grady 2008; Smith , 2008). Many definitions of health have evolved over the last seven decades since the WHO’s universally accepted definition of health. Since then, the world has seen tremendous changes in health and trends of disease that warrant revisiting the health definition.

Health is not a “complete” state but ongoing and is dynamic not static; it varies from person to person depending on their unique situation, because somebody may appear healthy physically but may have an underlying emotional and social conditions that will hinder their optimal functioning. During COVID-19 outbreak, a lot happened to our social well-being including social distancing, lock-down, isolation, quarantine of infected and affected persons, and stay home rules. My question is “is our social well-being still complete?” Even though social distancing, isolation, quarantine and other measures are critical in the prevention and control of infectious disease epidemics, this affected mental health individually and collectively (Brooks, Webster, Smith, Woodland, Wessely & Greenberg, 2020).



However, looking at Travis' (1972) synoptic view of the illness-wellness continuum, I will say that at any point on the scale, irrespective of the person's state of health, one can move in either direction depending on many factors and interventions. It is critical whether the individual exhibits signs and symptoms of illness which may progress to disability leading to premature death if drastic measures are not taken and sustained, or they receive appropriate treatment and maintain optimum health through awareness, education and then progress to optimum level of wellness (Appendix A). A person's health along the continuum may tilt toward state of illness, death or to wellness depending on the measures taken.

COVID-19 exposed a lot of people to stigmatization which is characteristic of many other infectious and non-infectious diseases detrimental to mental health and wellbeing (Smith & Hughes, 2014). Therefore, it is difficult for somebody to be in a state of complete health. Even at the

neutral point along the continuum where a person for instance may be asymptomatic with no perceptible sign of illness, the individual may be in emotional or social chaos that cannot be identified or described either by the person or an onlooker but may lead to mental breakdown or high-risk behaviours detrimental to health.

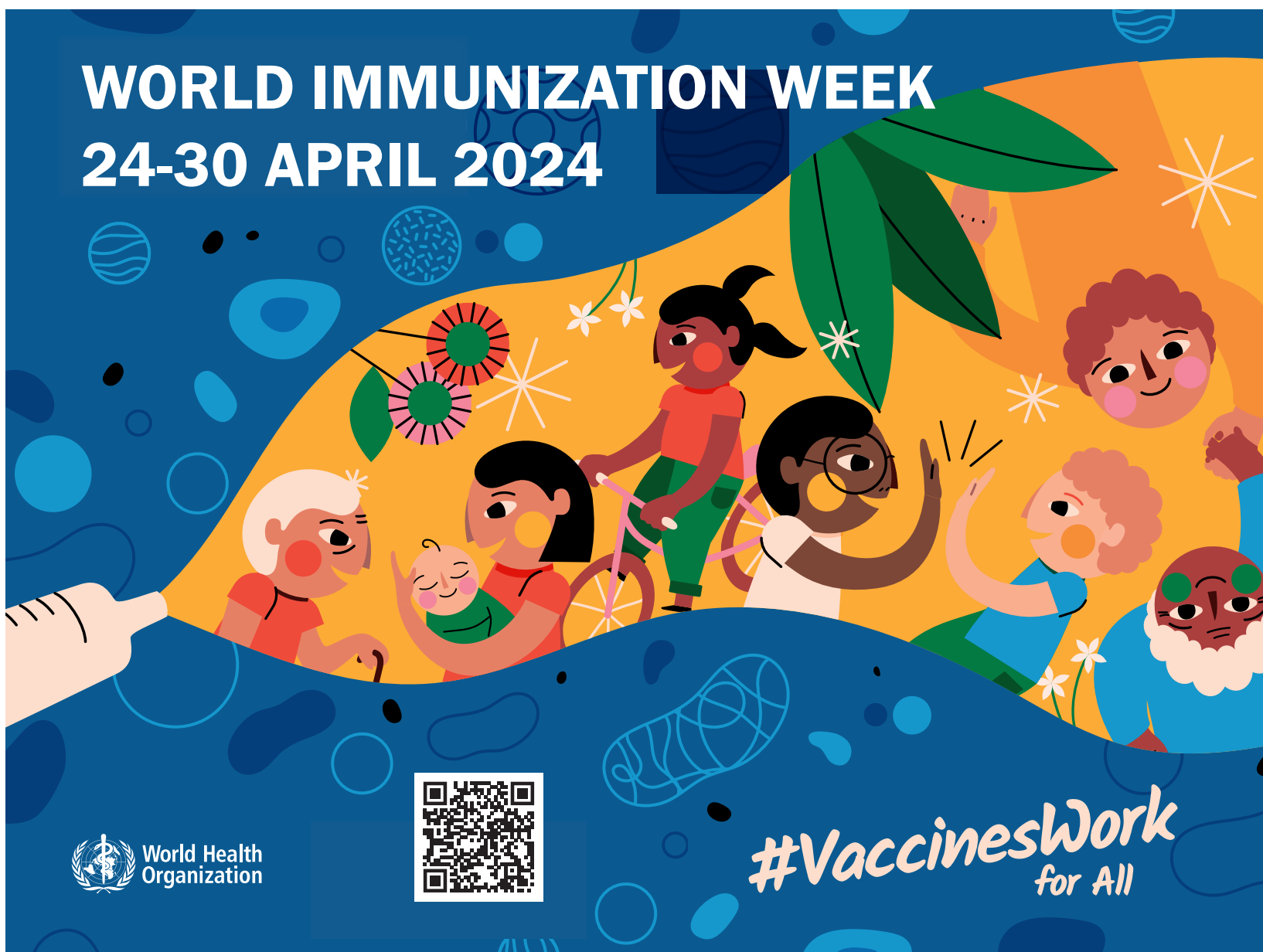
#### Hence a revised definition

Health is a dynamic state along the illness-wellness continuum which influences and/or is influenced by our physical, environmental, social, mental and spiritual state in the direction of optimum wellness using sustainable evidence-based measures

#### References

- [The Psychological Impact of Quarantine and How to Reduce It -](#)
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- [Definition of terms and concepts applicable to clinical preventive medicine -](#)
- [WHO definition of health, constitution -](#)
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# WORLD IMMUNIZATION WEEK 24-30 APRIL 2024



 World Health Organization



**#VaccinesWork**  
for All



# Sustaining partnerships in the Caribbean: Celebrating 30-years

By Ada Markaki, Co-Director; Lisa Theus, Program Manager; Maria Shirey, Director & Dean

In 2023, the PAHO/WHOCC for International Nursing at the University of Alabama at Birmingham School of Nursing (UABSON) celebrated an important milestone; 30 years of continuous PAHO/WHO re-designation. Searching through the archives, we discovered evidence of sustainable, equitable partnerships in the Caribbean region in alignment with WHO Strategic Directions for Nursing and Midwifery.

Select highlights, spanning 30 years of partnerships in the Caribbean, are presented below.

1990s:

**Jamaica:** UAB School of Nursing, with assistance from the UAB Sparkman Center for Global Health, pioneered distance accessible courses using the University of the West Indies Distance Teaching Experiment (UWIDITE). The UWIDITE system utilized a freeze-frame method of transmission, activated through telephone lines.

In 1991, a UAB delegation traveled to Kingston to discuss the potential for collaboration with the Director of Advanced Nursing Unit of the University of the West Indies-Mona

(UWI-Mona), Mrs. Syringa Marshall-Burnett, Dr. Sam Wray Dean of Medical Programs and nursing faculty.

In 1993, UABSON received designation as a PAHO/WHOCC, with two of the original TORs directly related to UWI-Mona:

- Assist in developing educational opportunities for UWI [Jamaica] nurses to become prepared in master's nursing education.
- Provide leadership in development of effective relationships between education and practice in the area of nursing research.

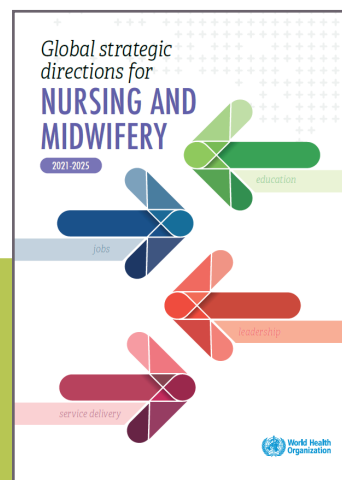
Although establishment of a master's in nursing at UWI-Mona was not accomplished at that time, the collaboration between the two institutions continued.

In 1998, Dr. Juanzetta Flowers, UAB WHOCC Deputy Director, consulted for Ms. Syringa Marshal-Burnett to finalize an application and Plan of Work for the Department of Nursing Education at UWI-Mona to be designated as a WHOCC.

Lectures by UABSON faculty continued to be offered over the UWIDITE system, which was sponsored by the PAHO Office of the Caribbean: a) "Principles of Therapeutic Touch" (Dr. Ann Clark); and b) "New Innovations in Teaching Adults" (Dr. Juanzetta Flowers).

**Bahamas:** UABSON worked with PAHO Advisor, Dr. Sandra Land, to set up a short-term consultation in Nursing Service Administration at the Bahamas Health Project. Dr. Nena Sanders, UABSON faculty member, developed a 40-hour course to improve the management skills of nurse leaders in the Bahamas, followed by 2-3 visits after course completion.

**Barbados:** The first study abroad nursing course "Transcultural Women's Health," offered by UABSON faculty Drs. Flowers and Clark, was launched.



<b>Education</b>	- use of innovative teaching technology - joint research efforts and scholarship
<b>Jobs</b>	- needs assessment - workforce development - migration & retention
<b>Leadership</b>	- mentoring the next generation of nurse leaders
<b>Service delivery</b>	- collaborating on WHOCC activities and priorities



Train-the-trainer on-site course offered by UAB faculty, Dr. Penni Watts, to the UWI-Mona Clinical Simulation faculty (2018).



Research training program; Drs. Eulalia Kahwa (UWI-Mona) and Rebecca Edwards (UAB) with trainees (2019)

UWI-Mona, Jamaica and UAB joint team meeting for pilot testing of the Educational Quality Improvement Toolkit (2022)



2000-2023:

Jamaica: In 2016, faculty exchanges through the UAB International Visiting Scholars program and the UWI-SON Research Internship program were initiated with emphasis on:

- Professional development in the use of information technology, clinical simulation, and e-learning
- Consultations for a new Clinical Simulation Lab planned by UWI-SON.
- Joint mentorship in research methods

In 2018, a Memorandum of Understanding was signed with UWI-Mona, Faculty of Medical Sciences, SON for the purpose of forging closer academic ties, cooperation, and collaboration in areas of interest and benefit to both institutions. Namely:

- research capacity-building for PhD students and candidates
- participation in PhD Dissertation Committees and external reviews

In 2019, UABSON faculty, Dr. Rebecca Edwards, supported UWI – Mona, WHOCC in carrying out a “Training program for nurses and faculty members of schools of nursing in developing capacity for nursing and health research in the Caribbean”, serving as: a) mentor in the 4-week training program, and b) facilitator for Community Based Participatory Research training.

From 2019 to 2021, the two WHOCCs collaborated in developing an asynchronous, distance-accessible course, “Quality improvement in nursing and midwifery educational

programs: a three-module online course for life-long learning”.






## Healthcare Workforce Development through Partnerships

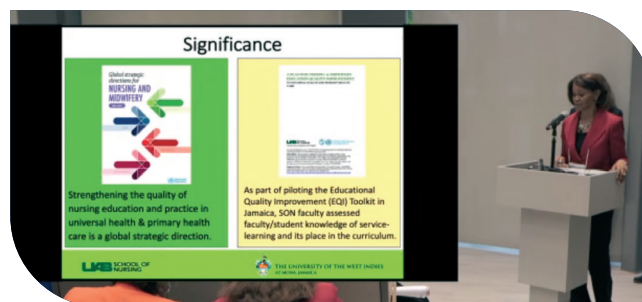
In 2022, the partnership continued in piloting the “Educational Quality Improvement Toolkit” at the UWI-Mona SON and culturally adapting for the Caribbean region. Joint podium presentations were given at the XVII Pan American Nursing Research Colloquium in Miami, Florida.

Last, in 2023, a research grant was launched. Pilot-testing a novel Interprofessional Diploma in Palliative Care program,” aims to train interprofessional providers in Jamaica and ameliorate the nurse migration effect on the country’s palliative care workforce. Similarly, discussions

were initiated to establish training programs in Oncology and Emergency Nursing, respectively.

This long-standing reciprocal partnership has resulted in a number of joint publications, with a few listed here:

- Sustaining global partnerships for simulation integration: Lessons from the field. *International Nursing Review*, 67(2):168-172. 
- Building capacity for nursing and midwifery education through an asynchronous online course. *Journal of Nursing Education*, 59(1),38-41. 
- A model operationalizing sustainability in global nursing. *Nursing Outlook*, 68(3), 345-354. 
- Palliative care integration: a critical review of nurse migration effect in Jamaica. *BMC Palliative Care*, 20(1):155 
- Adaptation and psychometric testing of the End-of-Life Professional Caregiver Survey in Jamaica. *BMC Health Services Research*, 23(1):498. 



Joint presentation by UAB and UWI-Mona (Dr. Dawn Munroe) at the Pan American Nursing Research Colloquium in Miami, FL (2022)



PAHO/WHO Collaborating Centers for Nursing and Midwifery meeting with Chief Nursing Officers from the Caribbean, Chicago, 2023.

**Other Caribbean partnerships:**

In 2022, the “Quality improvement in nursing and midwifery educational programs” course was piloted with participants representing the Caribbean region: Bahamas, Montserrat, St. Lucia, Trinidad & Tobago, Dominica and Barbados.

In September 2023, UAB WHOCC co-organized the Inaugural UAB Global Health Symposium with invited speakers/panelists from UWI-Mona Jamaica, UWI-St. Augustine in Trinidad & Tobago, and Johns Hopkins University. One of the panels focused on “Healthcare Workforce Development through Partnerships: Experience from the Americas” drawing on current initiatives among PANMCC members.

In November 2023, UAB WHOCC joined the Pan American Nursing and Midwifery Collaborating Centers (PANMCC) for an informative meeting with PAHO officials and the Chief Nursing Officers of the Caribbean nations. The meeting was hosted by the University of Illinois at Chicago WHOCC and focused on “Expanding Roles, Education and Regulation of

Caribbean Nurses in Primary Health Care”. Old collaborations were strengthened as well as new ones emerged.

For 2024, plans are under way to pilot the new asynchronous, distance-accessible course “Simulation and Technology in Nursing Education” with several Caribbean Schools of Nursing. Continuing this long-standing relationship with our Caribbean colleagues positions us well for ongoing sustainable and equitable partnerships for the future.

For more information:  
Contact - Ada Markaki, Co-Director WHOCC for International Nursing, University of Alabama at Birmingham: markaki@uab

**WHO-ICRC Basic Emergency Care: Open-access training course for frontline healthcare providers who manage acute illness and injury with limited resources**




**“Emergency Care Saves Lives - 25x25x25”**



Joint presentations hosted at UAB SON with Caribbean and PANMCC partners (2023)



Expert panel, UAB Global Health Symposium, Birmingham, AL, USA. (2023) - [Panelists: Drs. Nancy Reynolds, Courtney Sullivan, Ada Markaki, Rebecca Edwards, Oscar Ocho]

A photograph of two young children, a boy in a blue shirt and a girl in a yellow shirt, washing their hands under a running faucet. The water is splashing, and the background is a blurred green outdoor setting.

“WHO’s work  
is about serving  
people, and serving  
humanity. Most  
importantly, it’s  
about fighting to  
ensure the health  
of people as a basic  
human right.”

WHO Director General  
Dr Tedros Adhanom  
Ghebreyesus



World Health  
Organization



# Expanding Roles, Education and Regulation of Caribbean Nurses in Primary Health Care



*"Expanding Roles, Education and Regulation of Caribbean Nurses in Primary Health Care"  
Participants - (01 Nov 2023, Chicago, IL USA - Photo Credit: Jon Reyes)*

In partnership with the Pan American Health Organization (PAHO), the College of Nursing at University of Illinois Chicago's PAHO/WHO Collaborating Centre for International Nursing Development in Primary Health Care (USA-193) co-hosted the Expanding Roles, Education and Regulation of Caribbean Nurses in Primary Health Care workshop on 01-02 November 2023 in Chicago, Illinois USA.

focused on expanding nurses' practice roles, enhancing education, updating regulations, and increasing cooperation with the Regional Nursing Body (RNB) in the Caribbean Community (CARICOM). Currently, nurses comprise the largest percentage (56%) of the region's health workforce<sup>1</sup>. Therefore, there is a need to increase investment in nursing education, regulation, and practice that will enhance Primary Health Care services and advance the WHO's goals of Universal Health Care and Universal Health Access in the region.

Participants for the two days of discussions included RNB representatives, Chief Nursing Officers and other delegates from various CARICOM countries, PAHO representatives, and members of the Pan American Nursing & Midwifery Collaborating Centers (PANMCC) -- Columbia University (USA-272), Johns Hopkins University (USA-297), New York University (USA-303), University of Alabama at Birmingham (USA-241), University of Illinois Chicago (USA-193), University of Maryland (USA-334), University of Miami (USA-349), University of Michigan (USA-283), University of North Carolina at Chapel Hill (USA-461), University of

Pennsylvania (USA-206), University of São Paulo at Ribeirão Preto (BRA-32), University of West Indies, Mona (JAM-15), and University of West Indies, St. Augustine (TRT-1). Other notable attendees comprised nursing leaders, faculty, deans/directors of schools of nursing, and heads of healthcare institutions from across the Caribbean.

A total of 64 individuals from 20 countries (Anguilla, Antigua & Barbuda, Bahamas, Barbados, Belize, Brazil, British Virgin Islands, Dominica, Grenada, Guyana, Haiti, Jamaica, Montserrat, Saint Kitts-Nevis, Saint Lucia, Saint Vincent & the Grenadines, Suriname, Trinidad & Tobago, Turks & Caicos Islands and USA) participated in the hybrid discussions. The workshop featured presentations and working group discussions about education, regulation, migration, working conditions and interprofessional teams. Participants shared experiences and lessons learned in strengthening nursing in the Caribbean and emphasized the important role of PAHO/WHO Collaborating Centres in the region. In addition, opportunities for technical cooperation were identified.

**There is a need to increase investment in nursing education, regulation, and practice that will enhance Primary Health Care services and advance Universal Health Care and Universal Health Access in the region**

The workshop's goal was strengthening nursing's contributions towards primary health care in the Caribbean. Meeting discussions



**“It is necessary to acknowledge the important shortfalls in availability, capacity, competence, and quality of the health workforce in the region. In this sense, Member States can use the technical and strategic guidelines included in the Policy on the Health Workforce 2030 to strengthen their human resources for health to support the achievement of universal health and resilient health systems”**



**Benjamin Puertas,**  
Chief of the Human Resources for Health Unit, PAHO/WHO.

Based on discussions during the event, agreements were reached in the following topics:

- Governance and leadership
- Education
- Expanding the role of nurses
- Migration and retention
- Working conditions
- Interprofessional education and collaboration and
- Regulation

This workshop underscores PAHO's efforts to invest in and strengthen human resources for health, particularly in the field of nursing, in the Region of the Americas.

# Emergency Care Saves Lives

**“We are also working hard to support countries to deliver lifelong training to continuously improve health worker competencies and quality of care.**

**The Global 25 x 25 x 25 Campaign which aims to provide access to basic emergency training for 25% of nurses and midwives from 25 countries by the end of 2025”**

**Dr Tedros Adhanom Ghebreyesus,**  
*the Director General of the WHO*



**World Health Organization**





# Addressing nurse faculty training needs and challenges for incorporating simulation in nursing education in the Caribbean



By Megan Eagle RN, MPH, PhD  
& Jody R Lori CNM, PhD

The PAHO/WHO Collaborating Center at the University of Michigan recently led several workshops on incorporating clinical simulation into nursing education curriculum in the Caribbean region in support of PAHO's commitment to strengthening nursing education. The work began in early 2022 with a needs survey of 53 nurse educators from 14 Caribbean countries. The findings indicated that while 73% of respondents had clinical learning centers, more than half of the faculty were only slightly or not at all confident in their ability to lead key components of simulation such as scenario development, pre-briefing, facilitation, and debriefing. Most faculty reported their curriculum utilized simulation for health assessment and task training only. The survey also identified strong interest in using simulation to teach evidence-based practice, team communication and reinforce learning in areas such as mental health.

Based on the results of the survey, Drs Deborah Lee, Melissa Bathish (co-directors of the Clinical Learning Center at the University of Michigan) and faculty member Dr. Jessica Marsack, created a 3 half-day workshop entitled "Optimizing Simulation: Best Practices for Nursing Education" which was conducted virtually in July 2022. The workshop covered various simulation-based education topics, including simulation standards of best practice, simulation manikins and standardized patients, simulation design, facilitation, psychological safety, pre-briefing, debriefing, hybrid clinical learning, and a panel discussion on simulation education challenges and solutions. Participants from nursing programs in the Caribbean were joined by colleagues from Thailand and Botswana for this virtual event. A 3-month post workshop survey found all participants had retained the new knowledge, 70% had used specific skills from the training, and half reported an increase in the use of clinical simulation in their educational programs.



University of Michigan Faculty with Barbados Community College Faculty at an in-person workshop held in Barbados in June 2023.

With support of PAHO/WHO representatives from Barbados and the Eastern Caribbean, the team from University of Michigan collaborated with nursing leadership at Barbados Community College (BCC) to create an in-person training the following summer. This initiative commenced on 2 June 2023 with an opening ceremony attended by Dr. Amalia Del Riego, PAHO/WHO representative for Barbados and the Eastern Caribbean, and Dr. Andy Partapsingh, HSS advisor for Barbados and the Eastern Caribbean. Dr. Del Riego emphasized the value of academia in health system transformation. She reiterated PAHO's commitment to supporting the BCC in enhancing the opportunities for nursing professionals' learning in the Caribbean region as it supports the region's recommitment to the Primary Health Care initiative.

The 3-day workshop, "Simulation in Clinical Education: Imagine the Future" for 30 faculty from BCC was conducted at BCC was led by Drs. Lee, Bathish, and Marsack. In the words of Dr. Lee, the goal of the workshop was to "explore the latest evidence-based practices, learn from one another's experiences, and enhance our teaching skills to create a lasting impact on the future of healthcare professionals.

Together, we can impact our next generation of nurses, thus leading to better patient outcomes".

Interactive sessions, discussions, and hands on activities were designed to promote collaboration, enhance critical thinking, and foster innovation. Participants were introduced to skills of pre-briefing and debriefing with students, developing exemplar cases for pediatrics and critical care scenarios, creating low-cost task trainers, and how to facilitate simulations in challenging situations. This provided an opportunity to bridge the gap between theory and practice and to learn from each other's experiences.

The workshops were followed by a series of web-based discussions based on participant interest, covering how to develop standardized patient programs, the use of simulation in mental health, and the integration of simulation into midwifery curriculum. The University of Michigan School of Nursing PAHO/WHO Collaborating Center will continue this work with both self-study modules (available later this year in Spanish, English and Portuguese) and additional training programs to enhance impact of high-quality simulation on nursing and midwifery education in the region.

**"an opportunity to bridge the gap between theory and practice and to learn from each other's experiences"**



**WHAT ARE NURSING SIMULATION LABS LIKE?**





# Installing Community Competencies for Safer Motherhood in Latin America

Ending preventable maternal deaths and ensuring safe motherhood are critical priorities set out in the Sustainable Development Goals (SDGs) 2016-2030, the United Nations Global Strategy for Women's, Children's and Adolescents' Health, and the Pan American Health Organization's (PAHO) Sustainable Health Agenda for the Americas (ASSA). However, equitable access to quality obstetric care remains a significant challenge in many countries, particularly in Latin America and the Caribbean, a region characterized by high fertility rates and increasing life expectancy. This area faces specific problems related to its demographic, epidemiological and obstetric transition stage, where maternal mortality stands out as a critical event that affects the right to safe motherhood.

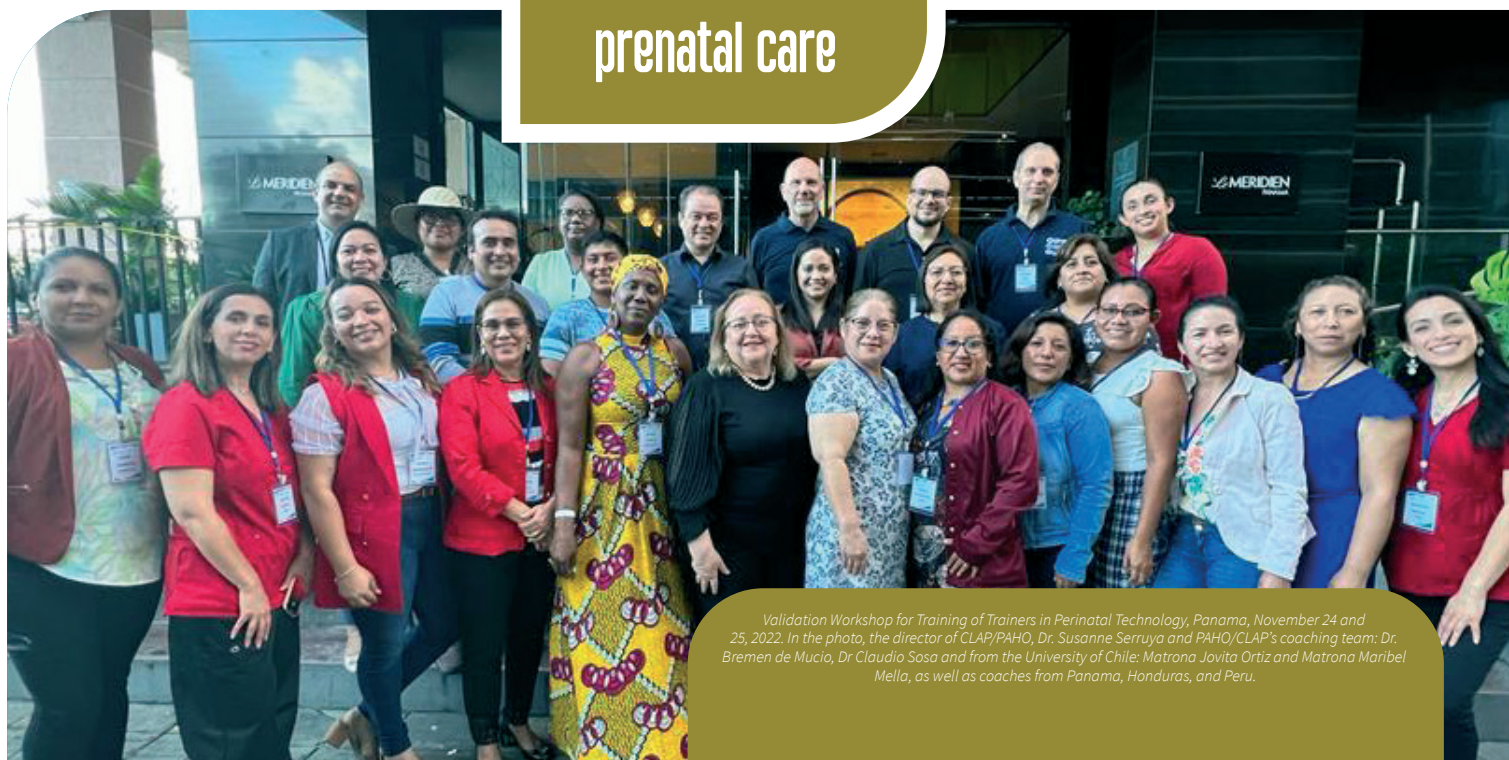
Faced with this reality, PAHO has implemented strategies to reduce maternal mortality, with goals such as reducing the Maternal Mortality Ratio (MMR) to 30 or less per 100,000 live births by 2030. However, the COVID-19 pandemic revealed major challenges, causing a reversal of previous achievements. The health crisis deepened health inequalities and affected maternal morbidity due to socioeconomic factors, comorbidities, and the interruption of sexual and reproductive health services, leading to delays in seeking and receiving adequate medical care, increasing maternal mortality, mainly in rural communities.

In this context, PAHO's Latin American Center for Perinatology (CLAP by its acronym in Spanish) has focused on improving health services and strengthening midwifery capacities to promote health and care for pregnant women and meet their needs in the most vulnerable communities in Latin America.

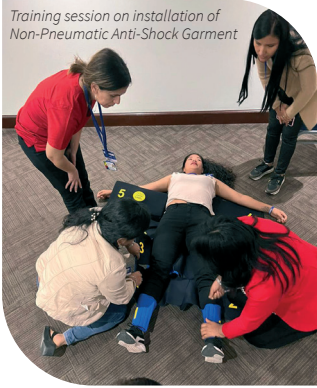
To address these needs, PAHO, collaborated with the WHO/PAHO Collaborating Center for Midwifery Development at the University of Chile, within the framework of a project funded by Canada. The team designed, validated, and replicated a training program in the use of community-based perinatal technologies, previously developed by CLAP, favoring the promotion and prevention of maternal and perinatal health. The objective of this training was to

build the capacity of traditional birth attendants, community workers and, eventually, families to improve maternal survival and promote the strengthening of maternal care networks from the community to health care centers. Applying an intercultural approach, the workshops focused on key aspects of health promotion and essential prenatal care. To this end, various teaching methodologies adapted for adults are implemented, such as the dialogue of knowledge and participatory presentations, and the simulation of low and medium fidelity, for the learning of CLAP technologies, as well as non-pneumatic anti-shock suits (TANN)

Applying an intercultural approach, the workshops focused on key aspects of health promotion and essential prenatal care



Validation Workshop for Training of Trainers in Perinatal Technology, Panama, November 24 and 25, 2022. In the photo, the director of CLAP/PAHO, Dr. Susanne Serruya and PAHO/CLAP's coaching team: Dr. Bremen de Mucio, Dr. Claudio Sosa and from the University of Chile: Matrona Jovita Ortiz and Matrona Maribel Mello, as well as coaches from Panama, Honduras, and Peru.



Training session on installation of Non-Pneumatic Anti-Shock Garment



Training of trainers, Honduras, August 2023



Training of trainers, Panamá, September 2023

**137 new instructors were trained in the use of perinatal technologies and basic strategies to reduce maternal mortality**

and Cradles VSA devices for blood pressure measurement. Thus, the workshops focused on topics such as self-care during pregnancy, the use of perinatal technologies adapted to the community, the early identification of warning signs, the early diagnosis of obstetric emergencies, and the development of skills for efficient and safe transport in emergency situations. In addition, communication skills were fostered between health professionals and care institutions, thus strengthening the support network for pregnant women.

In the second half of 2022, training programs and materials were developed, and during 2023, workshops were held in Panama, Honduras, Peru, and Guatemala, with participants from more than six Latin American countries. Overall, 137 new instructors were trained in the use of perinatal technologies and basic strategies to reduce maternal mortality. In addition, the workshops revealed the need to establish an organized community response plan to obstetric emergencies. For this reason, a strategic plan called the Community Obstetric Emergency Response Plan (PREOC) was collectively conceived, composed of four essential links: 1. Identify warning signs, 2. Activate the response and communication system, 3. Provide safe and relevant life support, and 4. Ensure safe referral and transfer. The importance of educating communities in these crucial aspects and customizing the plan according to each country's community, administrative and health system structure was underlined.

Participants from all countries evaluated these workshops positively, highlighting their quality, usefulness and relevance to their local and cultural contexts and valuing their cultural relevance, methodologies, and contents. In the reflective analysis, they highlighted the importance of education and community coordination in the prevention of maternal mortality.

This initiative is under development, with trainers replicating workshops in their respective countries, which can imply a significant advance in the promotion of maternal health and the improvement of access to maternal and perinatal care in the region.



Training team, Peru, November 2023.



Participants in a training of trainers, Guatemala, November 2024.



# Instalando competencias comunitarias para una maternidad más segura en Latinoamérica

Poner fin a las muertes maternas prevenibles y garantizar una maternidad segura constituyen prioridades críticas establecidas en los Objetivos de Desarrollo Sostenible (ODS) 2016-2030, en la Estrategia Mundial para la Salud de las Mujeres, los Niños y los Adolescentes de las Naciones Unidas y en la Agenda Sostenible de Salud para las Américas (ASSA) de la Organización Panamericana de la Salud (OPS). Sin embargo, el acceso equitativo a la atención obstétrica de calidad sigue siendo un desafío significativo en muchos países, particularmente en América Latina y el Caribe, una región caracterizada por su alta tasa de fecundidad y una esperanza de vida en aumento. Esta área enfrenta problemáticas específicas relacionadas con su etapa de transición demográfica, epidemiológica y obstétrica, donde la mortalidad materna se destaca como un evento crítico que afecta el derecho a una maternidad segura.

Ante esta realidad, la OPS ha implementado estrategias para disminuir la mortalidad materna, con metas como reducir la Razón de Mortalidad Materna (RMM) a 30 o menos por cada cien mil nacidos vivos para 2030. Sin embargo, la pandemia de COVID-19 reveló grandes desafíos, causando un retroceso en los logros previos. La crisis sanitaria profundizó las desigualdades en salud y afectó la morbilidad materna debido a factores socioeconómicos, comorbilidades y la interrupción de servicios de salud sexual y reproductiva, lo que llevó a demoras en la búsqueda y recepción de

atención médica adecuada, aumentando la mortalidad materna, principalmente en las comunidades rurales.

En este contexto, el Centro Latinoamericano de Perinatología (CLAP) de la OPS se ha enfocado en fortalecer los servicios de salud y fortalecer capacidades en partería para promover la salud y la atención a las mujeres gestantes y satisfacer sus necesidades en las comunidades más vulnerables de Latinoamérica.

Para abordar estas necesidades, la OPS en colaboración con el Centro Colaborador de la OMS/OPS para el desarrollo de la partería de la Universidad de Chile, en el marco de un proyecto financiado por Canadá, diseñaron, validaron y replicaron entrenamientos en el uso de tecnologías perinatales comunitarias,

previamente desarrolladas por el CLAP, favoreciendo la promoción y la prevención en salud materna y perinatal. El objetivo de estos entrenamientos fue construir capacidades en parteras tradicionales, trabajadores comunitarios y, eventualmente, familias para mejorar la supervivencia materna y promover el fortalecimiento de las redes de atención materna desde la comunidad hacia los centros de atención de salud. Aplicando un enfoque intercultural, los talleres se enfocaron en aspectos claves para la promoción de la salud y el cuidado prenatal esencial. Para ello se implementó de diversas metodologías de enseñanza adaptadas para adultos, tales como el diálogo de saberes y exposiciones

Aplicando un enfoque intercultural, los talleres se centraron en aspectos clave de la promoción de la salud y la atención prenatal esencial



Taller de Validación para la Formación de Formadores en Tecnología Perinatal, Panamá, 24 y 25 de noviembre de 2022. En la foto, la directora del CLAP/OPS, Dra. Susanne Serruya y el equipo de coaching de la OPS/CLAP: Dr. Bremen de Mucio, Dr. Claudio Sosa y de la Universidad de Chile: Matrona Jovita Ortiz y Matrona Maribel Mella, además de entrenadores de Panamá, Honduras y Perú



Sesión de formación sobre instalación Prenda antichoque no neumática



Formación de formadores, Honduras, agosto 2023



Formación de formadores, Panamá, septiembre 2023

# 137 nuevos Se capacitó a instructores en el uso de tecnologías perinatales y estrategias básicas para reducir la mortalidad materna

participativas, y la simulación de baja y mediana fidelidad, para el aprendizaje de tecnologías de CLAP, así como trajes antishock no neumáticos (TANN) y dispositivos Cradles VSA para toma de presión arterial. Así, los talleres se enfocaron en temas como el autocuidado durante el embarazo, el uso de tecnologías perinatales adaptadas a la comunidad, la identificación temprana de signos de alarma, el diagnóstico precoz de emergencias obstétricas, y el desarrollo de habilidades para el traslado eficiente y seguro en situaciones de emergencia. Además, se fomentaron habilidades comunicativas entre los profesionales de la salud y las instituciones de atención, fortaleciendo así la red de soporte para las gestantes.

Los participantes de todos los países evaluaron estos talleres positivamente, destacando su calidad, utilidad y relevancia para sus contextos locales y culturales y valorando la pertinencia cultural, metodologías- y contenidos. En el análisis reflexivo, destacaron la importancia de la educación y coordinación comunitaria en la prevención de la mortalidad materna.

Esta iniciativa se encuentra en desarrollo, con entrenadores replicando talleres en sus respectivos países, lo cual puede implicar un avance significativo en la promoción de la salud materna y el mejoramiento del acceso a la atención materna y perinatal en la región.

En el segundo semestre de 2022, se desarrollaron los programas y materiales de entrenamiento, y durante el 2023, se llevaron a cabo talleres en Panamá, Honduras, Perú y Guatemala, contando con participantes de más de seis países latinoamericanos y formando a 137 nuevos instructores en uso de tecnologías perinatales y estrategias básicas para reducir la mortalidad materna. Adicionalmente, los talleres revelaron la necesidad de establecer un plan de respuesta comunitaria organizada ante emergencias obstétricas. Por ello, se concibió colectivamente un plan estratégico denominado Plan de Respuesta a la Emergencia Obstétrica Comunitaria (PREOC), compuesto por cuatro eslabones esenciales: 1. Identificación de señales de alarma, 2. Activación del sistema de respuesta y comunicación, 3. Proporcionar soporte vital seguro y pertinente, y 4. Asegurar una derivación y traslado seguros. Se subrayó la importancia de formar a las comunidades en estos aspectos cruciales y personalizar el plan según la estructura comunitaria, administrativa y del sistema de salud de cada país.



Equipo de capacitación, Perú, noviembre de 2023.



Participantes en una capacitación de formadores, Guatemala, noviembre de 2024.



John Hopkins University, School of Nursing  
WHO Collaborating Centre for Nursing Information,  
Knowledge Management and Sharing - USA297



## The WHO Collaborating Center for Nursing Knowledge, Information Management, and Sharing Welcomes the new Johns Hopkins School of Nursing Institute for Policy Solutions

The Johns Hopkins School of Nursing (JHSON) recently launched the Institute for Policy Solutions at 555 Pennsylvania Street in Washington, DC under the direction of Vincent Guilamo-Ramos, PhD, MPH, LCSW, RN. The Institute will work with health policy leaders, innovators, and researchers to strengthen health care systems by elevating, developing, and implementing evidence-based, actionable nurse-led solutions. Its goal is to shift policy and practice toward more preventive, value-based and whole-person care approaches, away from treatment-focused care.

The goals of the Institute are well aligned with the WHO Strategic Directions for Nursing and Midwifery and the Johns Hopkins School of Nursing WHO Collaborating Center for Nursing Knowledge, Information Management, and Sharing agenda. Under the direction of Nancy R Reynolds, The JHSON WHO Collaborating Centre hosts the Global Alliance for Nursing and Midwifery (GANM) is focused on supporting the professional development of nurses and midwives through its online community of practice. It consists of more than 3700 professionals from countries around the world

By Chang Chiu, A., Docal, M.F.,  
Reynolds, N.R.

By leveraging their respective expertise, the two entities can conduct research that informs policy decisions and promotes evidence-based practices in nursing.





coming together to strengthen the capacity of nurses and midwives and improve the health of communities globally through online discussions, webinars, online library resources, and professional connections. The platform allows for equitable access to the discussions regardless of internet bandwidth, giving nurses and midwives a global voice: <https://nursing.jhu.edu/ganm>

Collaborative work between the Johns Hopkins School of Nursing WHO Collaborating Center for Nursing Knowledge, Information Management, and Sharing and the Johns Hopkins Policy Institute has the potential to be mutually beneficial. By working together, these two entities can promote the voice of nursing in leadership and policy, driving meaningful change.

One potential key avenue for collaboration between the Center and the Policy Institute is through joint research initiatives. By leveraging their respective expertise, the two entities can conduct research that informs policy decisions and promotes evidence-based practices in nursing. This research can focus on a wide range of topics, including workforce development, health inequities, migration, and the impact of nursing interventions on patient outcomes.



Additionally, the Center and the Policy Institute can collaborate on advocacy efforts to promote the role of nursing in leadership and policy. This can involve participating in policy forums, engaging with policymakers, and advocating for policies that support nursing education, practice, and research. By working together, the Center and the Policy Institute can amplify their advocacy efforts and effect positive change in healthcare policy and global health.

The Center can also serve as a valuable resource for the Policy Institute by providing access to its global network of nursing experts and researchers. This network can be tapped into for expertise on nursing-related issues and for collaboration on joint projects.

By leveraging the resources of the Center, the Institute can enhance its impact on healthcare policy.

Guilamo-Ramos expresses strong enthusiasm and support for this collaboration, “advancing the role of the nursing workforce in addressing global health inequities is a priority for health and public health systems across the globe. The WHO Collaborating Center and the Institute for Policy Solutions at the JHSON are uniquely positioned to have meaningful impact in elevating the leadership of the nursing workforce to tackle the most pressing issues facing our planet through advancement of scalable nurse driven solutions.”



**By working together, the Center and the Policy Institute can amplify their advocacy efforts and effect positive change in healthcare policy and global health.**

# GLOBAL NETWORK OF WHO COLLABORATING CENTRES FOR NURSING AND MIDWIFERY

**AFRO** - WHO REGION FOR AFRICA

**AMRO** - WHO REGION FOR THE AMERICAS

**EMRO** - WHO REGION FOR THE EASTERN MEDITERRANEAN

**EURO** - WHO REGION FOR EUROPE

**SEARO** - WHO REGION FOR SOUTH EAST ASIA

**WPRO** - WHO REGION FOR THE WESTERN PACIFIC

**AFRO**

**AMRO**

**EMRO**

INSTITUTION	COLLABORATION CENTRE	CITY/COUNTRY	CODE
University of Botswana	WHO Collaborating Centre for Nursing and Midwifery Development	Gaborone, Botswana	BOT3
University of South Africa (UNISA), Department of Health Studies	WHO Collaborating Centre for Postgraduate Distance Education and Research in Nursing and Midwifery Development	Pretoria, South Africa	SOA14
University of KwaZulu-Natal, School of Nursing	WHO Collaborating Centre for Educating Nurses and Midwives in Community Problem-solving	Durban, South Africa	SOA13
University of Malawi, Kamuzu College of Nursing	WHO Collaborating Centre for Interprofessional Education and Collaborative Practice	Lilongwe, Malawi	MAL3
University of Pennsylvania, School of Nursing	WHO Collaborating Centre for Nursing and Midwifery Leadership	Philadelphia, USA	USA206
McMaster University	WHO Collaborating Centre in Primary Care Nursing and Health Human Resources	Hamilton, Canada	CAN39
University of Michigan, School of Nursing, Office of International Affairs	WHO Collaborating Centre for Research and Clinical Training in Health Promotion Nursing	Ann Arbor, USA	USA283
University of Alabama at Birmingham, School of Nursing	WHO Collaborating Centre for International Nursing	Birmingham, USA	USA241
Columbia University, School of Nursing	WHO Collaborating Centre for Advanced Nursing Practice	New York, USA	USA272
University of Illinois at Chicago	WHO Collaborating Centre for International Nursing Development in Primary Health Care	Chicago, USA	USA193
University of Miami, School of Nursing and Health Studies	WHO Collaborating Centre for Nursing Human Resources Development and Patient Safety	Miami, USA	USA349
New York University, Rory Meyers College of Nursing	WHO Collaborating Centre in Gerontological Nursing Education	New York, USA	USA303
John Hopkins University, School of Nursing	WHO Collaborating Centre for Nursing Information, Knowledge Management and Sharing	Baltimore, USA	USA297
University of North Carolina at Chapel Hill, School of Nursing	WHO Collaborating Centre in Quality and Safety Education in Nursing and Midwifery	Chapel Hill, USA	USA461
University of Sao Paulo, College of Nursing at Ribeirao Preto	WHO Collaborating Centre for Nursing Research Development	Sao Paulo, Brazil	BRA32
The University of West Indies School of Nursing, Mona (UWISON)	WHO Collaborating Centre for Nursing and Midwifery Development in the Caribbean	Kingston, Jamaica	JAM15
University of the West Indies (UWI) at St. Augustine, School of Nursing	WHO Collaborating Centre in Nursing Policies and Leadership	St. Augustine, Trinidad and Tobago	TRT1
Pontifical Catholic University of Chile	WHO Collaborating Centre for Health Services and Nursing Development for Noncommunicable Disease Care	Santiago, Chile	CHI19
University of Chile	WHO Collaborating Centre for Development of Midwifery	Santiago, Chile	CHI18
University of Bahrain, College of Health & Sport Sciences (CHSS)	WHO Collaborating Centre for Nursing Development	Manama, Bahrain	BAA1
Jordan University of Science and Technology	WHO Collaborating Centre on Nursing Development	Irbid, Jordan	JOR16

INSTITUTION	COLLABORATION CENTRE	CITY/COUNTRY	CODE
Glasgow Caledonian University, Department of Nursing and Community Health	WHO Collaborating Centre for Nursing and Public Health Education and Research	Glasgow, Scotland	UNK160
Nursing Research Foundation	WHO Collaborating Centre for Nursing	Helenski, Finland	FIN19
Nursing School of Coimbra	WHO Collaborating Centre for Nursing Practice and Research	Coimbra, Portugal	POR14
Cardiff University, College of Biomedical and Life Sciences, School of Healthcare Sciences	WHO Collaborating Centre for Midwifery Development	Cardiff, Wales	UNK276
Lithuanian University of Health Sciences	WHO Collaborating Centre for Nursing Education and Practice	Kaunas, Lithuania	LTU4
Catholic University of Leuven	WHO Collaborating Centre for Human Resources for Health Research and Policy	Leuven, Belgium	BEL51
Office for Health Improvement and Disparities (OHID), Chief Nurse Directorate	WHO Collaborating Centre for Public Health Nursing & Midwifery	London, England	UNK277
Paracelsus Medical University, Institute of Nursing Science and Practice	WHO CC for Nursing Research and Education	Salzburg, Austria	AUT15
The Israeli Ministry of Health, Nursing Division	WHO Collaborating Centre for Leadership and Governance in Nursing	Jerusalem, Israel	ISR32
Ramathibodi School of Nursing, Faculty of Medicine Ramathibodi Hospital, Mahidol University	WHO Collaborating Centre for Nursing and Midwifery Development	Bangkok, Thailand	THA35
Mahidol University, Faculty of Nursing	WHO Collaborating Centre for Nursing and Midwifery Development	Bangkok, Thailand	THA34
Chiang Mai University, Faculty of Nursing	WHO Collaborating Centre for Nursing and Midwifery Development	Chiang Mai, Thailand	THA43
Christian Medical College and Hospital	WHO Collaborating Centre for Nursing and Midwifery Development	Vellore, India	IND138
University of Nursing, Yangon	WHO CC for Nursing and Midwifery Development	Yangon, Myanmar	MMR4
Postgraduate Institute of Medical Education and Research (PGIMER), National Institute of Nursing Education	WHO Collaborating Centre for Nursing and Midwifery Development	Chandigarh, India	IND140
University of Philippines, Manila	WHO Collaborating Centre for Leadership in Nursing Development	Manila, Philippines	PHL13
University of Technology Sydney	WHO Collaborating Centre for Nursing, Midwifery and Health Development	Sydney, Australia	AUS93
St Luke's International University, College of Nursing	WHO CC for Nursing Development in Primary Health Care	Tokyo, Japan	JPN58
University of Hyogo, Research Institute of Nursing Care for People and Community	WHO Collaborating Centre for Disaster Risk Management for Health	Kobe, Japan	JPN77
The Hong Kong Polytechnic University (HKPU), Faculty of Health and Social Sciences, School of Nursing	WHO Collaborating Centre for Community Health Services	Hong Kong, China	CHN89
Peking Union Medical College, School of Nursing	WHO Collaborating Centre for Nursing, Policy-Making and Leadership	Beijing, China	CHN129
Yonsei University, College of Nursing	WHO Collaborating Centre for Research and Training for Nursing Development in Primary Health Care	Seoul, Republic of Korea	KOR16
The Catholic University of Korea, College of Nursing, Research Institute for Hospice and Palliative Care	WHO Collaborating Centre for Training in Hospice & Palliative Care	Seoul, Republic of Korea	KOR104

**EURO**

**SEARO**

**WPRO**



## The 17th National Nursing Conference

# “Toward Metaverse: Nursing System Post Pandemic in Aging Society”

Nowadays, Thailand is becoming an aging society and the dependency ratio of older people to working age and the burden of public health expenses are increasing. In response, the country is actively working on healthcare reforms to support elderly citizens in which the nursing profession plays a crucial role in caring for older people. As our population ages, the demand for healthcare services grows exponentially, especially amidst and post the COVID-19 Pandemic. Metaverse is one of the innovations that can enhance efficiency and quality in education, practice, and health management. As digital technology can help alleviate and mitigate the scarcity of time, place, resources, and nurses in caring for patients, families and communities, creating innovations for healthcare systems in the virtual world will be beneficial.

Innovation such as Metaverse can offer a unique opportunity to bridge gaps in nursing care to enhance the value of nursing services by providing efficient, accessible, and personalized care such as remote patient monitoring, virtual consultations, or immersive training for healthcare professionals.

For this purpose, the Nurses' Association of Thailand together with Thailand Nursing and Midwifery Council and Nursing Division, Ministry of Public Health jointly organized the 17th National Nursing Conference under the topic “Toward Metaverse: Nursing System Post Pandemic in Aging Society” between December 4 – 7, 2023. This conference also aimed to honor the 100th Anniversary of the Birth

of Her Royal Highness Princess Galyani Vadhana Krom Luang Naradhiwas Rajanagarindra. The objectives of the 17th National Nursing Conference were to create knowledge and understanding of a new direction of nursing professional development towards the digital platform, by sharing through symposiums, plenary sessions, seminars, student forum, and virtual exhibition. Attendees of the Conference included approximately 1,500 nurses who were nurse administrators, nurse educators, professional nurses and nursing students from both public and private sectors. The Conference took place at the Grand Richmond Hotel, Nonthaburi, Thailand.



Associate Professor Dr. Amaporn Ratinthorn, Dean of the Faculty of Nursing, Mahidol University and Director of WHOCC for Nursing and Midwifery Development, presented on “Metaverse for Nursing Education” in Plenary Session 1: (Platform for Workforce Preparation in Aging Society: A Solution for Healthcare Workforce Education and Training).



Conference participants during Plenary Session 1: (Platform for Workforce Preparation in Aging Society: A Solution for Healthcare Workforce Education and Training)



Professor Dr. Sukit Limpijumngong, President of the National Science and Technology Development Agency (NSTDA), joined as a speaker on the topic “Healthcare Education Towards Metaverse”. Photo credit: The Nurses' Association of Thailand



Professor Dr. Patricia Davidson, Vice-Chancellor, University of Wollongong, Australia, presented on the topic “Game Changer in Nursing Education Towards Metaverse”. Photo credit: The Nurses' Association of Thailand

# The 33rd Academic Conference

## “Precision Nursing: Challenges Role in Improving Quality of Care”



Associate Professor Dr. Ameporn Ratinthorn, Dean of the Faculty of Nursing, Mahidol University and Director of WHOCC for Nursing and Midwifery Development delivered the Conference's objectives



Professor Dr. Siriorn Sindhu, the President of the Nurses' Association of Thailand was a keynote speaker on "Empowering Precision Nursing to Achieve the SDGs: Global Action"



Group photo featuring all the esteemed attendees



Panel discussion on "Integration of Precision Nursing at the beginning of life: Role of midwifery"

The Faculty of Nursing, Mahidol University, held the 33rd Academic Conference on “Precision Nursing: Challenges Role in Improving Quality of Care” during January 18 – 19, 2024, at Golden Tulip Sovereign Hotel, Bangkok. The Conference's objectives included knowledge exchange in precision nursing, applying the precision nursing to innovative practices, and strategic planning for education, research, and community services.

Precision nursing represents a new innovative approach to personalized health care. It encompasses problem identification, preventive measures, and the creation of tailored care plans for individuals by considering genetic variations, environmental factors, and the individual's lifestyle. Precision nursing enables nurses to predict more accurately which nursing practices are suitable for each patient. The Faculty of Nursing, Mahidol University, and WHO Collaborating Centre for Nursing and Midwifery Development at the Faculty of Nursing, Mahidol University, recognizes the ongoing advancements in precision nursing that nurses are encouraged to understand the concept of precision health system policy and its practical application to enhance public access to nursing services. With knowledgeable faculty members specializing in nursing and midwifery, the Faculty of Nursing actively supports the implementation of precision health policies which includes fostering the competency of Thai nurses in delivering precision nursing services.

The conference facilitated networking among participants, strengthening the potential of precision nursing for sustainable health development. There were distinguished speakers from both the public and private sectors joining to share through keynote and plenary

sessions on various topics. This conference had 450 participants, consisting of academic staff, professional nurses, nursing students from various institutions, both public and private sectors.



E-poster of the 17th National Nursing Conference "Toward Metaverse: Nursing System Post-Pandemic in Aging Society" Photo credit: The Nurses' Association of Thailand



# Undignified Maternity Care: Voices of Rural South African Registered Midwives

A recent study by the WHO Collaborating Centre at the University of KwaZulu Natal in South Africa, explored midwives' experiences of problematic maternity care. Researchers conducted an ethnographic study in a rural health facility, undertaking detailed observations of seven participating midwives including five who were also interviewed.

In recent years, the WHO has moved to promote facility-based childbirth under the care of skilled birth attendants in low and middle income countries, to reduce mortality associated with pregnancy and childbirth. This study was prompted by concerns about lack of dignity and respect for women in labour and birth, which may discourage women from seeking skilled maternity care, increasing the risks for themselves and their infants.

The study examined the attitudes and practices of a group of experienced midwives, all female. Their experience ranged from eight to 40 years in midwifery. The researchers found evidence of disrespectful obstetric practices. They observed that women were not included in decisions about labour and delivery, and that some underwent clinical interventions that they did not consent to. They found examples of obstetric violence, including physical, verbal and emotional abuse; negative attitudes to the women; and inadequate pain relief during labour.

**The study demonstrates  
the importance of ongoing  
education for midwives**

“Yes, sometimes we do yell at patients, especially (the) ‘small young ones’ who are pregnant and not married... they do not listen. I tell them that we are not allowed to hit them therefore, they have to do as we tell them. We tell them to take a deep breath and place the chin on the chest while looking at the vulva where baby is coming.”

*[Midwife 2, F, 9 years of experience]*



*By Dr O. B. Baloyi  
and Mrs. T.A Mayisela*



“It’s difficult when the baby is about to come out, the mother doesn’t listen and just screamed. I have to force her legs to open...it’s exhausting you know. I ask women to sit up and view between their thighs, and I ask them: ‘Do you see your baby’s head? It’s not there’. Such patients just do not listen, you have to slap the thighs, it works all the time.”

*[Midwife 2, F, 9 years of experience]*

Structural factors affected midwives’ capacity to provide high quality healthcare, including limited space during labour and birth meaning that women’s chosen support people were unable to attend. Insufficient facilities also meant that the care provided was not private.

“Relatives can stay for about ten minutes, but they are not allowed to sit in, so there is no continuous support unfortunately because of lack of space, and we are always short-staffed, it works well for us though that they are not allowed to sit in, they can be irritating sometimes.”

*[Midwife 3, F, 40 years of experience]*

“Women in labour and those who are postpartum share the same space, this is a small clinic, and it is difficult for them not to know what is going on with the next person. It is a real problem but we try to maintain privacy, we do the best we can you know but it is not easy.”

*[Midwife 4, F, 8 years of experience]*

These practices did not offer respectful maternity care, despite its importance to realising the United Nations' Sustainable Development Goals 3.1 and 3.2. The evidence of poor quality care, condescending attitudes and lack of autonomy are worrying and indicate a violation of women's right to dignity. Obstetric violence and abuse pose a serious threat to women's safety and well-being. It will also deter them from seeking support from skilled birth attendants in future pregnancies.

The study demonstrates the importance of ongoing education for midwives in similar settings, including access to mentors who model respectful care for pregnant and labouring women to promote their autonomy and dignity.

**Structural factors  
affected midwives'  
capacity to provide  
high quality healthcare**





# Regional Nursing and Midwifery Forum in the Western Pacific

## The Philippines - 14th to 16th February 2024.

Nursing and midwifery leaders of the Western Pacific region met together from 14-16 February 2024 for the first Regional Nursing and Midwifery Forum held in nearly two decades. The Forum focused on commitments made at the 71st World Health Assembly - “optimizing nurses and midwives’ contributions to achieving Universal Health Coverage (UHC)”. In attendance was senior nursing and midwifery leaders from 26 countries across the region, representatives from 7 WHO Collaborating Centres in the region, as well as industry partners and experts including representatives from South Pacific Community, UNICEF, United Nations Population Fund, and 22 WHO Regional and Country officers. WHO Chief Nursing Officer Dr. Amelia Latu Afuha’amango Tuipulotu also attended with Dr Carey McCarthy, WHO Technical Officer.

The Regional Director for the Western Pacific Dr Saia Ma’u Piukala, opened the forum, emphasizing the critical role of nurses and midwives in the region’s healthcare landscape; “Nurses and midwives are key to achieving health for all, and supporting and investing in them

is a matter of great priority to me. Once again, I am delighted to be with you for this well-overdue forum”. Dr. Piukala recognised the current and emerging challenges associated with increasing UHC contributions by nurses and midwives, including the need for quality education, adaptation to evolving health needs, and the creation of supportive working environments.

The Forum was dedicated to understanding the diverse perspectives of the current state of nursing and midwifery. From global, regional, and country perspectives, challenges were identified and discussed in relation to specific country contexts. Country panels were then set up from State of the World’s Nursing (SoWN) report and State of the World’s Midwifery (SoWMy) report

country profiles, and participants were encouraged to discuss their situations and challenges relevant to each country and share ideas. Dr Carey McCarthy, WHO Technical Officer emphasised the importance of contributing to the upcoming 2025 SoWN report to better understand the range of health challenges specific to the Western Pacific Region (WPR) and potential policy options to address them.

Sessions held throughout the forum focused on a range of key challenges including the impact of COVID-19 on retention and the migration of nurses and midwives in the region, leadership, continuing professional development (CPD) and education.

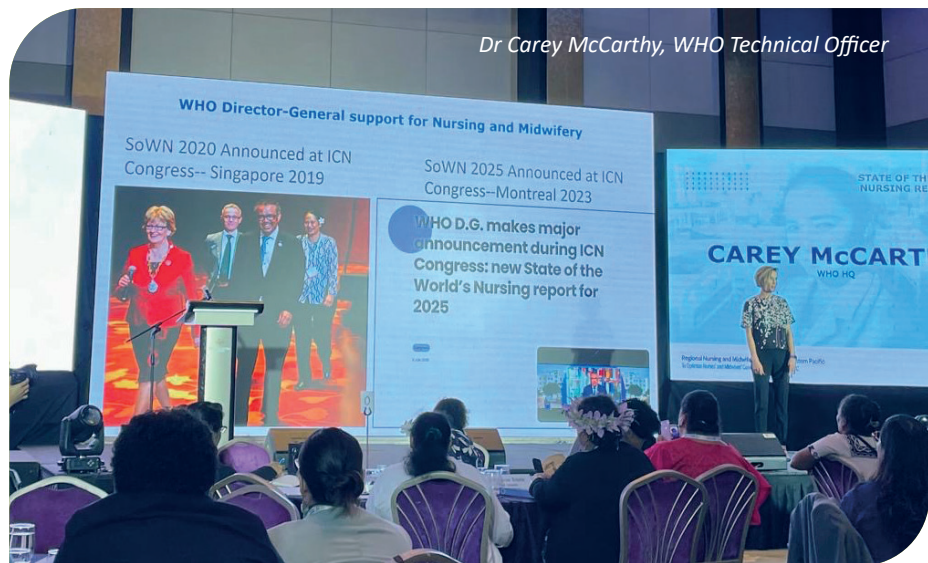
**Cross region comparisons were used to illustrate the challenges in strengthening leadership and involving nurses and midwives in policy and decision-making processes.**



Pacific Nursing Leaders and Chief Nursing Officers



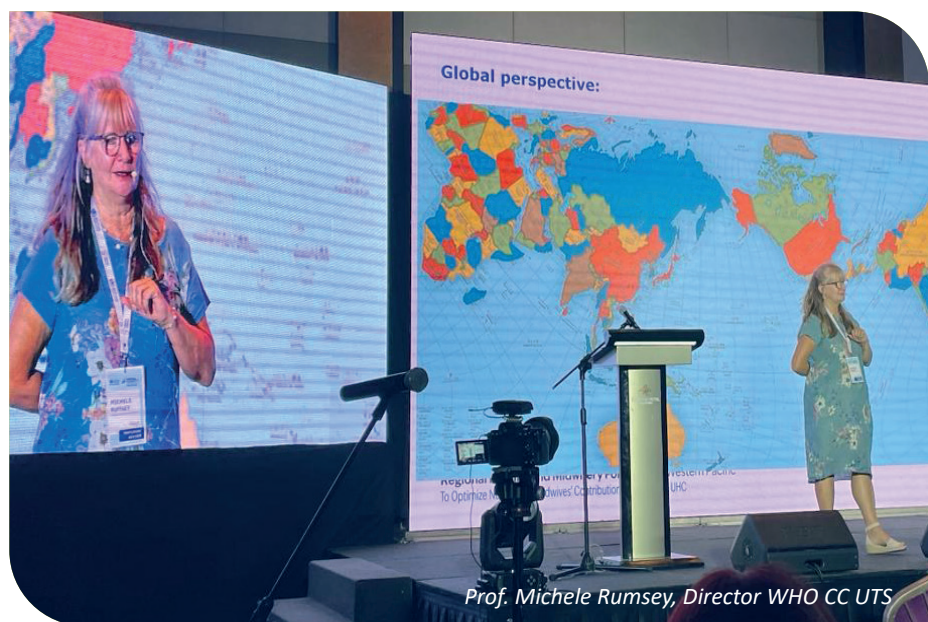
Dr Saia Ma'u Piukala,  
Regional Director for the Western  
Pacific, Opening Remarks at the  
Regional Nursing  
and Midwifery  
Forum in the  
Western Pacific



Dr Carey McCarthy, WHO Technical Officer

Delegates highlighted and reviewed WHO initiatives and their effectiveness in providing safe and efficient working environments for nurses and midwives. These challenges were discussed in line with the four Strategic Directions set out in the WHO Global Strategic Directions for Nursing and Midwifery 2021-2025: Jobs Leadership, Service Delivery and Education. Cross region comparisons were used to illustrate the challenges in strengthening leadership and involving nurses and midwives in policy and decision-making processes. WHO CC UTS in collaboration with the South Pacific Chief Nursing and Midwifery Officers Alliance (SPCNMOA) presented two reports during the forum: 'The Impact of the COVID-19 Pandemic on Nurses' & Midwives' Retention and Migration' and 'Service Delivery: Contributions towards Achieving UHC - Nurse Practitioners'. These reports highlighted initiatives attempting to address these issues. A workshop on Education followed to continue discussions of CPD in the WPR. Following country reports, discussion focused on the challenges of preparing the health workforce for changing health needs, and ensuring healthcare delivery quality after licensure, with participants offering solutions and further cross region comparisons.

The Forum also presented an opportunity for Chief Nursing Officers across the Pacific to get together and collaborate on forthcoming Pacific Leadership Program (PLP).



Prof. Michele Rumsey, Director WHO CC UTS

WHO CC UTS is hosting the PLP in Sydney with 30 Pacific Nursing and Midwifery leaders, nominated by their country Chief Nursing Officers. Historically, participants in this program reported improved knowledge and skills resulting in broader outlooks, greater self-awareness, confidence and motivation. Participants were able to apply new knowledge and skills in using data to produce policies and improve practice, quality, build partnerships, public health preparedness, and community capacity. They understood the role of government leadership and translation of data to create health systems that meet population needs, with many experiencing successful career progression into country Chief Nursing roles.

**"We would like to acknowledge Eriko Anzai, RN, PHN, MN, in her role as Regional Nursing Officer WHO WPRO, and her exceptional coordination which was instrumental in successfully orchestrating this pivotal regional meeting" -thank you.**





2024 CUK-AAPINA  |   
International Nursing Conference

# Navigating the Nursing Ecosystem : Environment, Humanity, & Technology

**May 23 (Thur) – 24 (Fri), 2024**  
Omnibus Park Convention Hall,  
The Catholic University of Korea,  
Seoul, South Korea

## Keynote Speakers



**Eun-Ok Im**  
Dean of School of  
Nursing at The  
University of Texas  
at Austin, USA



**Mark Lazenby**  
Dean of Sue & Bill Gross  
School of Nursing at The  
University of California,  
Irvine, USA



**Reiko Sakashita**  
Executive Vice President of  
School of Nursing Art and  
Science at University of  
Hyogo, Japan

### Important Dates

Abstract Submission Deadline **February 29, 2024**  
Early-Bird Registration Deadline **April 30, 2024**

<https://event.fourwaves.com/2024cainc/pages>





The Catholic University of Korea, College of Nursing,  
Research Institute for Hospice and Palliative Care  
WHO Collaborating Centre for Training in Hospice & Palliative Care - KOR104



2024 CUK-AAPINA International Nursing Conference:

# Navigating the Nursing Ecosystem with a Focus on Environment, Humanity, & Technology

The Catholic University of Korea (CUK) and Asian American/Pacific Islander Nurses Association (AAPINA) are hosting the 2024 CUK-AAPINA International Nursing Conference under the theme “Navigating the Nursing Ecosystem: Environment, Humanity, & Technology” in collaboration with the Research Institute for Hospice/Palliative Care.

The conference is scheduled to take place from May 23 to May 24, 2024 (KST) at the Catholic University of Korea (Seoul, South Korea).

This conference aims to explore the concept of nursing ecosystem, emphasizing the critical roles of environments, humanity and technology in healthcare.

It is expected to bring together nursing research, practice, education, and leadership to foster a comprehensive dialogue and exchange ideas regarding the impact of environments on evolving landscape of nursing in the digital era.

For more information, please check below.

- Early-bird Registration deadline: ~ April 30, 2024 (KST)
- Standard Registration: ~ May 22, 2024
- Conference Date: May 23, 2024 - May 24, 2024 (KST)
- Venue: The Catholic University of Korea, 222, Banpo-daero, Seoul, South Korea
- Contact: 2024cainc@gmail.com

See more here





## Empowering Healthcare: European WHO Collaborating Centres in Nursing and Midwifery

In the intricate tapestry of European healthcare, the WHO Collaborating Centres stand as resilient pillars, anchoring the advancement of nursing and midwifery. These centers, strategically distributed from the picturesque city of Salzburg to the bustling metropolis of Glasgow, the historic streets of Lithuania to the academic enclave of Leuven, and the cultural hub of Cardiff to the coastal town of Coimbra, serve as vibrant nuclei of innovation and expertise. Their concerted efforts resonate with the overarching vision outlined in the WHO Strategic Directions for Nursing and Midwifery 2021-2025, aiming to elevate healthcare quality and accessibility through multifaceted initiatives in education, research, and practice.

**AUT15 - Paracelsus Medical University, Institute of Nursing Science and Practice, Salzburg Austria:** *Illuminating Pathways in Palliative Care and Nursing Education*

Nestled in the heart of Europe, the Salzburg WHO Collaborating Centre for Nursing Research and Education stands as a beacon of excellence and innovation. Housed within the esteemed Institute of Nursing Science and Practice at the Paracelsus Medical University, this center epitomizes dedication to advancing healthcare, particularly in palliative care and nursing education. Since its designation by the WHO in 2016, the center has been instrumental in pioneering comprehensive training programs tailored to address the intricate needs of patients requiring end-of-life care. Through strategic collaborations with esteemed partners such as the Dachverband Hospiz Österreich and St. Virgil Salzburg, the center has implemented a three-stage model for palliative care training, spanning basic interprofessional courses to specialized in-depth training for managerial roles within the hospice and palliative care sector. Furthermore, the center's commitment to research excellence is evidenced by its notable contributions, including a recent science prize awarded to one of its students for groundbreaking work on pediatric palliative care at the Children's Centre of the University Hospital Salzburg. This recognition underscores the center's pivotal role in advancing nursing roles and patient care. In light of the recent conclusion of its collaboration with the WHO, we extend our heartfelt gratitude to them for their support and partnership over the years, which has been invaluable in furthering our mission to advance healthcare and nursing education. As we transition from this partnership, we do so with appreciation for the shared accomplishments and with optimism for future collaborations.

the WHO  
Collaborating  
Centres stand as  
resilient pillars,  
anchoring the  
advancement  
of nursing and  
midwifery

**UNK160 - Glasgow Caledonian University, Glasgow, Scotland. Department of Nursing and Community Health:** *Catalyst for Global Change in Nursing Education and Policy*

Glasgow Caledonian University's Collaborating Centre stands as a linchpin in global nursing education and policy influence. Through synergistic partnerships with Nursing and Midwifery Collaborating Centres across Europe, including Hotus University, KU Leuven, and the Nursing School of Coimbra, Glasgow has spearheaded transformative initiatives aimed at revolutionizing nursing education and policy paradigms. Noteworthy achievements include comprehensive reviews of undergraduate and postgraduate nursing programs in Moldova, meticulously conducted to align with international standards and best practices. Furthermore, Glasgow's contributions to Advanced Practice Nurse Policy Briefs, endorsed by the WHO, have played a pivotal role in shaping nursing policy development on a global scale. With its redesignation slated for October 2024, Glasgow remains poised to continue its impactful journey, driving excellence and innovation in nursing and midwifery education and advocacy.

**LTU4 - Lithuanian University of Health Sciences, Kaunas, Lithuania:** *Leadership in Nursing Education and Global Engagement*

The Lithuanian University of Health Sciences (LSMU) WHO Collaborating Centre has emerged as a vanguard in nursing and midwifery education, transcending borders to shape global healthcare landscapes. Through a multifaceted approach encompassing international showcases, mentoring activities, and impactful research endeavors, LSMU has solidified its position as a beacon of leadership and innovation. Notable highlights include the center's leadership in nursing and midwifery education showcased at international conferences, underlining its commitment to knowledge exchange and global engagement. Additionally, LSMU's involvement in mentoring activities for potential new WHO Collaborating Centres, coupled with its impactful research projects in collaboration with WHO/Europe, underscores its dedication to advancing health policy and practice on a global scale.

**BEL51 - Catholic University of Leuven, Belgium:**  
*Bridging Research and Policy in Health Workforce Development*

At the helm of integrating research findings into health policy and practice stands the WHO Collaborating Centre for Human Resources for Health Research and Policy at KU Leuven. With a steadfast focus on nursing and midwifery, Leuven's endeavors are underpinned by evidence-based practices, multidisciplinary collaboration, and policy influence beyond traditional healthcare boundaries. Noteworthy achievements include the center's involvement in reviewing the Nursing Bachelor Program Curriculum of Moldova, aimed at fostering alignment with global health goals and standards. Moreover, Leuven's collaborations with WHO Europe on nursing development in Ukraine underscore its commitment to shaping health policy at the national level and furthering the objectives of the WHO Strategic Directions for Nursing and Midwifery.

**UNK276 - Cardiff University, Cardiff, Wales. College of Biomedical and Life Sciences, School of Healthcare Sciences:** *Spearheading Midwifery Education and Global Partnerships*

Cardiff University's Collaborating Centre has carved a niche in spearheading midwifery education and fostering impactful global partnerships. Through active engagement in international conferences, innovative approaches, and the development of essential resources for midwifery practitioners, Cardiff has played a pivotal role in advancing maternal and newborn health globally. Notable achievements include the center's participation in the International Confederation of Midwives Conference, facilitating knowledge exchange and collaboration on a global scale. Furthermore, Cardiff's involvement in the development of a Pocketbook on maternal and newborn care for the WHO European Region underscores its commitment to driving excellence and innovation in midwifery education and practice.

**POR14 - Nursing School of Coimbra. Coimbra, Portugal:**  
*Innovating Nursing Solutions for Improved Patient Outcomes*

The WHO Collaborating Centre at the Nursing School of Coimbra epitomizes innovation and excellence in developing and implementing nursing solutions for improved patient outcomes. Recent initiatives include groundbreaking research, thematic focus on neonatal care, and a steadfast commitment to driving practical innovation in healthcare delivery. Noteworthy highlights include the center's initiatives in preventing pressure injuries and managing diabetes-related foot complications, showcasing its dedication to improving patient outcomes through research and innovation.

**ISR32 - The Israeli Ministry of Health, Nursing Division, Jerusalem Israel:** *Advancing Global Health Through Nursing Leadership and Governance*

The Israeli WHO Collaborating Center for Leadership and Governance in Nursing, as the EURO regional representative of the Global Network of Nursing and Midwifery (GNNMWCC), is at the forefront of enhancing global health through nursing and midwifery.

The center participated in leadership training programs in Central Asia, notably in Uzbekistan and Kyrgyzstan, aimed at strengthening the capacities of senior nursing leaders. This initiative reflects the Center's dedication to preparing nursing professionals to address and navigate the multifaceted challenges within healthcare systems effectively. Engaging in a comprehensive study with the new WHO center in Ireland, the ICN organization, and the European Student Organization in Nursing, the Center is currently looking at issues such as the recruitment and retention of young nursing graduates in the European region. This effort underscores the Center's commitment to addressing nursing workforce challenges through evidence-based research and collaboration. The introduction of hybrid training sessions to develop professional regulatory guidelines marks a significant advancement in nursing education and practice, particularly benefiting participants from Eastern European countries. With an ongoing redesignation process and plans to expand research activities in collaboration with WHO and partners like Jhpiego, the Center is set to deepen its impact on nursing leadership and governance.

In conclusion, the European WHO Collaborating Centres in Nursing and Midwifery embody a unified commitment to driving transformative change in healthcare delivery and outcomes. Through their collaborative efforts, groundbreaking research, and innovative initiatives, these centers continue to shape the future of nursing and midwifery, aligning closely with the WHO's strategic objectives and paving the way for a healthier future for all.



1. WHO Collaborating Centre for Human Resources for Health Research and Policy - Belgium
2. WHO Collaborating Centre for Nursing - Finland
3. WHO Collaborating Centre for Nursing Education and Practice - Lithuania
4. WHO Collaborating Centre for Nursing Practice and Research - Portugal
5. WHO Collaborating Centre for Nursing and Public Health Education and Research - Scotland
6. WHO Collaborating centre for midwifery development - Wales
7. WHO Collaborating centre for Public Health Nursing and Midwifery - England
8. WHO Collaborating Centre for Leadership and Governance in Nursing - Israel

# USEFUL RESOURCES

**Making older persons visible in the sustainable development goals' monitoring framework and indicators**



Published by WHO  
4 March 2024 | Report

**Strategy for optimizing national routine health information systems: strengthening routine health information systems to deliver primary health care and universal health coverage**



Published by WHO  
3 March 2024 | Publication

**HIV drug resistance – brief report 2024**



Published by WHO  
29 February 2024 | Technical document

**Deinstitutionalization of people with mental health conditions in the WHO South-East Asia Region**



Published by WHO  
28 February 2024 | Report

**Citizen engagement in evidence-informed policy-making: a guide to mini-publics**



Published by WHO  
26 February 2024 | Guidance (normative)

**Biennium Report 2022–2023 Department of Healthier Populations and Noncommunicable Diseases (HPN)**



Published by WHO  
26 February 2024 | Report

**Health system resilience indicators: an integrated package for measuring and monitoring health system resilience in countries**



Published by WHO  
21 February 2024 | Publication

**Guide for conducting national and subnational programme reviews for maternal, newborn, child and adolescent health**



Published by WHO  
19 February 2024 | Guidance (normative)

**Family planning and comprehensive abortion care toolkit for the primary health care workforce: volume 3. Dissemination, implementation, monitoring and evaluation (DIME)**



Published by WHO  
31 December 2023 | Toolkit

**Prevention and protection against attacks on health care: good practices**



Published by WHO  
31 December 2023 | Publication

**WHO Regional Committee Resolutions and Decisions - See the resolutions and decisions from each Regional Committee meeting:**

WPRO



AMRO



EMRO



AFRO



EURO



**WHA76 Report - Nursing Advocacy & influence in global health policy**



Published by ICN  
November 2023 | Report

**Midwives and Climate: A toolkit for midwives and midwifery advocates during the UN Climate Change Conference (COP)**



Published by ICM  
15 February 2024

**Respectful Maternity Care Toolkit**



Published by ICM  
5 January 2024

**Regulation Toolkit**



Published by ICM  
5 January 2024

# EVENTS 2024

## MARCH

**Creating Healthy Work Environments**  
8-10 March 2024  
Washington, DC, USA  
or  
14-15 March 2024  
Virtual  
[SIGMA](#)



## APRIL

**World Health Day**  
7 April 2024  
[WHO](#)



## MAY

**International Day of the Midwife**  
5 May 2024  
Virtual  
[ICM](#)



**International Nurses Day**  
12 May 2024  
[WHO](#)

**Global Partners Meeting on Nursing and Midwifery**  
23-24 May 2024  
Geneva, Switzerland  
[WHO, ICN, ICM](#)



**Navigating the Nursing Ecosystem: Environment, Humanity, & Technology**  
23-24 May 2024  
Seoul, South Korea  
[KOR104, CUK, AAPINA](#)



## MAY/JUNE

**77th World Health Assembly 2024**  
27th May – 1st June  
[WHO](#)



## JULY

**35th International Nursing Research Congress**  
25-28 July 2024  
Singapore  
or  
6-8 August 2024  
Virtual  
[SIGMA](#)



## AUGUST:

**7TH AFREhealth Annual Symposium - Celebrating Milestones and Overcoming Challenges**  
6-8 August 2024  
Nairobi, Kenya  
[AFRE](#)



## SEPTEMBER

**World Patient Safety Day**  
17 September 2024



**Global Health Recalibration: Strengthening Outcomes, Education, Clinical Practice, and Research conference**  
4 - 6 September 2024  
Chiang Mai, Thailand  
[THA43, Nurse CMU](#)



**ICM Regional Conference Africa and Eastern Mediterranean: Midwives360**  
24-25 September 2024  
Kigali, Rwanda  
[ICM](#)



## NOVEMBER

**The XVIII Pan American Nursing Research Colloquium - Innovation and Impact of Nursing Research and Leadership”**  
6-8 November 2024  
Santiago, Chile  
[PANMCC](#)



**ICM Regional Conference Midwives360**  
7-8 November 2024  
Berlin, Germany  
[ICM](#)



## DECEMBER

**International Day of Persons with Disabilities**  
3 December 2024  
[ICN](#)



## 2025:

**ICN Congress 2025 -**  
9-13 June 2025  
Helsinki, Finland  
[ICN](#)





## Strong Partnerships to Strengthen Respectful Maternal and Newborn Care in the Latin and Caribbean Region

Respectful Maternal and Newborn Care (RMNC) refers to person-centered care that should be provided to all women and newborns in a manner that maintains their dignity, ensures freedom from harm and mistreatment, and enables informed choice. The concept is a core element of quality of care (QoC), which millions around the world are struggling to receive and provide. While women and newborns are centered in this discussion, the role of health workers is essential and the way they are treated by the health system should be acknowledged and addressed alongside efforts to improve QoC for women and newborns.

In the Caribbean, the University of West Indies (UWI) and Caribbean Regional Midwives Association (CRMA)—in partnership with USAID’s MOMENTUM Country and Global Leadership—are leading ongoing efforts to implement RMNC as an essential part of quality healthcare for women and newborns in the region. The goal is to help implement existing operational guidance on RMNC in two countries—Trinidad and Tobago, and Jamaica—to improve women’s, newborns’ and providers’ experience of care during childbirth and to help inform potential scale-up of RMNC approaches in other parts of the Caribbean.

### Trinidad and Tobago

In Trinidad and Tobago, CRMA and UWI led a study to explore women’s and providers’ perceptions and experience of childbirth care, including the experience of the male companion. The study found that communities and providers shared an understanding of what respectful care was and was not, and that although women reported high levels of satisfaction, women and providers both experienced psychosocial and structural manifestations of mistreatment.

To take these findings into the real world, CRMA and UWI led a workshop with communities (women and men), health care providers, professional associations, midwifery schools, NGOs, and Ministry of Health representatives to develop potential solutions to reduce mistreatment and promote RMNC. Potential interventions include: Integrating RMNC concepts and best practices into pre-service and in-service training of health providers, infusing RMNC into existing guidelines, updating existing posters and other materials with the latest RMNC information, and improving the tracking of women’s and their spouses’ experience of care during childbirth as part of efforts to improve the quality of care.

A representative from the Ministry of Health, Mrs. Debra Thomas, Manager of the National Breastfeeding Coordinating Unit says, “Evidence based decisions is one of our core values. RMC is high on our agenda and is now entrenched in our quest to maintain human rights and ensure everyone is treated with respect, humanity and care.”

Now, these two organizations, with the continued support of USAID’s MOMENTUM, will support local stakeholders like health care providers to implement and routinely monitor co-created RMNC interventions to assess progress and continuously strengthen RMNC program activities.



# Improve women's, newborns' and providers' experience of care during childbirth and to help inform potential scale-up of RMNC approaches in other parts of the Caribbean

## Jamaica

In Jamaica, UWI and CRMA have started engaging Jamaican counterparts on a foundational literature review to better understand the RMNC policy and program context in Jamaica and the Caribbean. Similar to the workshop in Trinidad, the two organizations will support discussions to co-design RMNC solutions that are specific to the Jamaican context but informed by the Trinidad experience and study results. It is anticipated that the Trinidad work will inform efforts in Jamaica to co-create a modest set of culturally relevant system, community, and facility RMNC interventions and incorporate these interventions into existing health systems.

"While the Caribbean is considered as one regional entity, there are unique sociocultural nuances as well as approaches to health systems management. Nevertheless, the findings served as a baseline that can be utilized as a framework for developing context specific interventions that can be further refined and aligned to each country's sociocultural contexts," says Dr. Oscar Noel Ocho, Director of UWI's School of Nursing and Project.

## The way forward

Lessons from both countries will be documented by USAID's MOMENTUM to inform potential scale-up of RMNC approaches in the region. A key learning from this effort will be evaluating, within a regional context, the applicability of assessment findings and interventions from Trinidad to Jamaica, which will be critical to understanding how best to design and implement RMNC program interventions that reflect a core set of universal activities to address mistreatment and promote respectful care, while still contextualizing to some extent to reflect regional differences.

A key contribution from this collaboration is the inclusion of the male perspective on RMNC. This was best summarized by the comments of a male participant who argued "Sometimes there's a tendency where the father is thought of kind of as a second-class parent...they will treat the father as if he isn't as much of a parent as the mother is, or if he would not be as caring as worried about his child as the mother might be."

This work is also advancing global and regional conversations around key aspects of the RMNC agenda, including the importance of male involvement during childbirth and how to integrate locally driven, contextually relevant interventions into existing health systems.



**j;**  
**jhpiego**



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**THEME:**  
PROGRESS TOWARDS SDGs IN AFRICA: CELEBRATING  
MILESTONES AND OVERCOMING CHALLENGES

## SUBTHEMES:

1	HARNESSING DIGITAL TECHNOLOGY AND INNOVATION FOR HEALTH PROFESSIONS EDUCATION TOWARDS ATTAINMENT OF SDGs	
2	RESEARCH TOWARDS ATTAINMENT OF SDGs	
3	EFFORTS TO BRIDGE GAPS: ACHIEVING UNIVERSAL HEALTH COVERAGE	
4	LEADERSHIP AND ADVOCACY TOWARDS SUSTAINING THE MOMENTUM OF SDGs	

FOR MORE INFORMATION ABOUT THE SYMPOSIUM, VISIT:

<https://afrehealth.org/2024symposium/>

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**ICN Congress**

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# 2024

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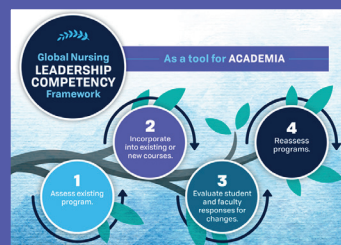
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SCAN ME



*By Katarzyna (Kasia) Czabanowska, prof.dr. I. , Elizabeth A. Madigan, PhD, RN, FAAN, FAODN , Emily McWhirter, PhD, RN , Barbara Stilwell, PhD, MSC, FRCN, FAAN*

Nurses and midwives comprise half of the global healthcare workforce yet remain severely under-represented in senior leadership roles. A comprehensive Global Nurse Leadership Competency Framework has been developed to address this longstanding issue. This framework, developed over two years through a multi-stage research and review process, is rooted in globally accepted evidence of effectiveness. Spearheaded by Sigma Theta Tau International Honor Society of Nursing (Sigma) and supported by the Johnson & Johnson Foundation, it is a beacon for both new clinical nurses and experienced academic nurses and leaders seeking to shape and strengthen their leadership capabilities.

In collaboration with global nursing leaders from many organizations and universities, our team, backed by a master's prepared librarian, embarked on an intensive literature search. Surprisingly, only 26 papers in healthcare leadership literature were identified based on evidence rather than expert opinion. Ten were deemed relevant, offering competency-based frameworks for nursing and other healthcare fields. The frameworks laid the groundwork for our Global Nurse Leadership Competency Framework, which seeks to strengthen leadership through seven key domains: strategy in leading self and others, collaboration, communication, transformation and change, governance, professional ethics, and evidence-based decision-making.

Recognizing the evolving landscape of healthcare, we identified crucial perspectives, or "lenses," critical for nurse leaders. These lenses – diversity and inclusion, political savvy, and systems thinking – provide a future-oriented outlook, addressing emerging issues vital to healthcare system development. In a world reshaped by the COVID-19 pandemic, nurse leaders must equip themselves with these competencies to effectively navigate today's health challenges and contribute to the well-being of patients, communities, and societies.

We engaged 14 subject matter experts (SMEs) from diverse global backgrounds to refine the competencies, representing nursing organizations, higher education, and high-level clinical practice. Two rounds of a Delphi survey provided invaluable feedback, enabling us to tailor competencies for relevance and importance. In collaboration with SMEs, the core team categorized competencies and provided behavioral indicators for four proficiency levels: novice, competent, expert, and luminary.

Currently undergoing testing, the Global Nurse Leadership Competency Framework is designed to be a living document, continuously evolving based on user feedback. To ensure global reach, it is available in eight languages: Arabic, Chinese, English, French, German, Portuguese, Russian, and Spanish. This framework is freely accessible to nurses worldwide, and we encourage active participation and feedback to enrich our collective leadership knowledge.

As nurses embark on their professional journey, consider the Global Nurse Leadership Competency Framework as a guide. Visit [www.sigmanursing.org/gnlcf](http://www.sigmanursing.org/gnlcf) to access this invaluable resource. Let us collectively shape the future of nursing leadership and bridge the gap in senior roles by utilizing and contributing to this dynamic framework. Individual nurse feedback will make this document a living testament to the strength and capabilities of the global nursing community.

The framework has many applications as a self-assessment by individual nurses, organizations, and schools of nursing wishing to develop or revise their leadership programs. It can be utilized by employers to support the leadership development of their staff. Employing the global nurse leadership competency framework establishes a solid evidence-based strategy, equipping nurses universally to nurture the skills and confidence crucial for embodying compassionate, thoughtful, and innovative leadership. It positions nurses as valuable contributors and aligns with the profession's overarching commitment to achieving universal health coverage -.



# GNWHOCCNM Midwifery Network in Action



**Pictured:** 1 & 2: Mahidol University nursing students & faculty  
 3: Billie Hunter (Cardiff University) in Tajikistan  
 4: Grace Thomas (Cardiff University) on Good Morning Namibia  
 5 & 6: University of Michigan nursing faculty and students in Uganda  
 7, 8, & 9: Nurse Midwife Intensives at University of Alabama School of Nursing  
 10: John Hopkins University midwifery faculty at Global Group Care Catalyzer in Kenya



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# ICM Regional Conferences

Regional Conference Africa and Eastern Mediterranean

**Kigali, Rwanda**  
**24-25 September 2024**

Regional Conference Europe

**Berlin, Germany**  
**7-8 November 2024**

More information on registration, programme, and poster submissions will be available in March at [www.icmregionals.org](http://www.icmregionals.org)



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**4**

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**5**

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YES  
NO

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World Health  
Organization

# Nursing and Midwifery

Photo by Ilyas Ahmed

[www.nursingandmidwiferyglobal.org](http://www.nursingandmidwiferyglobal.org)

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## Nursing and Midwifery Global Community of Practice (NMGCOP)

The NMGCOP aims to contribute to building sustainable health systems globally by providing a space for nurses and midwives to meet one another, share information and evidence, discuss important topics, and support one another.

The community fosters collective contribution through forums for discussion and teaching. It has three main objectives:

- To support an international community of nurses and midwives to build strategies towards achieving Universal Health Coverage
- To develop compassionate leaders who are powerful and inspirational agents for change
- To create opportunities to develop sustainable high-quality health care systems that are evidence based and data driven

The NMGCOP facilitates an environment where nurses and midwives are inspired and motivated to collaborate, engage and work together to meet the 'World Health Organization Triple Billion' targets by 2030. It is governed by a steering committee made up of global experts in nursing and midwifery.



# LINKS

LINKS is the Official Publication of The Global Network of World Health Organization Collaborating Centres for Nursing and Midwifery.

Nursing and Midwifery LINKS magazine aims to disseminate information on the Global Network of WHO Collaborating Centres for Nursing and Midwifery and publish technical-scientific articles related to Nursing and Midwifery in the light of WHO's program of work.

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