

## Nursing and Health Policy Perspectives

# World Health Organization Chief Nursing Officer Elizabeth Iro in interview: the COVID-19 pandemic, and nursing and midwifery challenges and qualities

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In an interview, World Health Organization Chief Nursing Officer Elizabeth Iro reflected on nursing during the COVID-19 pandemic and how nurses have risen to the challenges they have faced. Despite the cancellation of virtually all the activities planned to mark 2020 as the International Year of the Nurse and Midwife, she believes that nurses' leadership, courage, compassion, commitment and expertise have been revealed to the world like never before. However, it is critical to nurture and support the next generation of nurses so that they can help to bring about the necessary reforms for health systems around the world.

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[Correction added on 14 June 2021, after online publication: The author byline in the XML view online has been amended due to a tagging error.]

'Before COVID-19 was declared a pandemic, the novel coronavirus was recognized as a public health issue of international concern by the World Health Organization. There

was a lot of anticipation around that time, and there was a process at WHO before it got to the confirmation of a pandemic.

It felt quite daunting. We were just coming through to celebrate the International Year of the Nurse and Midwife with big plans. We had anticipated that we would kick off a global agenda on the first of January. At the same time, we were just coming through with the State of the World's Nursing report (WHO 2020), in terms of the data collection, so it was very worrying. I recall feeling quite concerned about how countries were going to respond, especially those that didn't have the critical number of nurses to manage, or were [already] struggling with their own pre-pandemic situation.

We were quite clear that we would continue with our planned strategy, but we knew some things would have to be paused, some activities would continue but needed to be revised, and some would have to be cancelled. I think we were fortunate, with hindsight, because we had established an oversight committee for the Year of the Nurse and Midwife. That oversight and collaboration was key to maintaining pressure on certain issues, but there were some variations in how we dealt with things within the organization.

There were key items that needed to be addressed: the State of the World's Nursing report was one that needed to be completed and launched – it was really critical. We also had the TRIAD meeting [of WHO, ICN and the International Confederation of Midwives and the world's government level nurses and midwives], which had to go ahead, and we were also in the middle of starting the collection of data for the State of the World's Midwifery report, and the consultation on the Strategic Directions for Nursing and Midwifery. These were all key areas of work that we could not take our eyes off.

At WHO, our Director-General was really quite clear that the functions and normative work would continue, but that there would also be a team that would respond to COVID-19 and all that went with it, including guideline development, the press releases and all that. The work was divided between departments and colleagues across the organization. So we were able to get through, but there are moments when you have to respond to countries, engage them in webinars, learn lessons from them: and I think the collaboration with the International Council of Nurses and the international community of nurses was very important, because it continued to expose and to share stories across the globe.

It was a very challenging year indeed. What was expected of nurses was for them to do the great work that they have always done. Obviously, some institutions and organizations had to halt the delivery of certain services, and some nurses were moved from one area to another to focus around the

COVID response, but otherwise, I had expected nurses would continue with the work that they normally did – and they did.

They responded extremely well. They continued to work under really trying circumstances. In some countries, we have had nurses who have gone on strike because the conditions of work were so poor, and the availability of protective equipment was not there. That to me was sending a big message to governments and organizations about making sure that we have the right equipment so nurses can continue to deliver the services they are supposed to. I don't think that nurses shy away from their responsibilities, but I also think that they are very clear in their intent to also be safe in the environment they are working in.

Sadly, nurses were infected, and some have died, and that has been terrible. But amazingly, nurses have just continued to do what they have to do to take care of the people they have to take care of. The resilience was there, but their skills and knowledge, and their creativity, show how they have continued to be compassionate in the challenging environment they had to work under.

The world has definitely been made aware of the value of nurses during the pandemic. That's important, but we are asking for a bit more now. Not just an acknowledgement of the value of nurses, but to see the investment now. That was the message of the International Year of the Nurse and Midwife – to raise the profile and to create action around investment in nurses because it's the best thing to do to future-proof our health systems.

We need investment in nurses and midwives now. Because of COVID, we need to keep the nurses who are currently in the workforce. And we need to look to training and educating more nurses to make sure we are addressing the shortage, and making sure that they have jobs to go to once they are trained. We are pushing for four key elements as a result of the State of the World's Nursing report – education, jobs, leadership and practice – because I am concerned that if we don't do anything about it now, we will not be in a good position to manage the next pandemic.

The time is now. We need to act now to start encouraging countries to really consider the options they have around nurse education, jobs, leadership and practice. This is the time to take that forward, and I feel we have aligned quite a few significant components in the last few years. We've had the Nursing Now campaign, ICN and WHO as key partners in this roll out, we've had the International Year of the Nurse and Midwife, we have got two key documents in the State of the World's Nursing report and the State of the World's Midwifery Nursing report, and soon there will be the Global Strategic Directions for Nursing and Midwifery, which will go

before the World Health Assembly [in May 2021] to help ministers with their planning. I really believe that now is the time to make those changes.

Some countries have already started to make some, even during last year, signalling some increases in the number of nurses in nurses. We just have to have this policy dialogue with government chief nursing and midwifery officers to get countries on board. That's another piece of work we are doing at the moment, strengthening and supporting government chief nursing and midwifery officers, creating a community of practice where we want to continue the engagement with them around the policy changes or issues, whether they are educational, regulatory or service issues that they want to address, because it's a priority in their country. And of course, we will be focusing on the Strategic Directions for Nursing and Midwifery and the policy options it offers. We need to not just rely on countries to say they are going to do something; we need to be alongside them to support them to make those changes and articulate those requests to ministries of health. That's a role that I'm really keen to fulfil.

Some countries have functional government level chief nursing officers, and some do not, some countries don't have anybody in the role, but they will have a "relevant other" at the centre as a focal point for nursing. I see my role as going out and supporting countries that want to appoint a chief nurse, supporting those that are in the office to help them develop, and encouraging those countries that don't have one [to appointment someone].

It has been a really tough year, and we have seen the leadership of nurses at various levels of practice and academia during COVID-19, coming forward and providing key supporting documents or guidance. My message is that nursing leadership is vital, and encouragement of our young nurses is going to be critical as a way forward. They have the power; they can influence change. What COVID-19 has shown is nurses' leadership, commitment, compassion, courage and expertise – that's what's going to provide the systemic change we want to see in our health systems. We have seen many changes in our profession, but there are some fundamental nursing practices, like collection of data and infection prevention and control that have held us in good stead, and we need to continue with those.

I want to recognize the work that nurses have done. Let's celebrate their success, but acknowledge that they will be the change, the change agents who will take us forward. I want to acknowledge all the nurses of the world for the work that they do in very challenging circumstances and thank them for their service'.

## Reference

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