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## 2020 year of the nurse and midwife: Meeting new challenges



As we ease into 2020 it is important to recognise that the World Health Organization has designated this as the "Year of the Nurse and Midwife", in honor of the 200th birth anniversary of Florence Nightingale. Nurses and midwives play a vital role in providing health services and in many communities they are the first and only point of care—this is especially true in the emergency care arena.

As we enter into this new year, we are confronted by the fact that we are facing a changing world with many new challenges and these will often first land on the doorstep of the emergency nurse. A case in point is the novel Coronavirus (COVID-19) which has been named a public health emergency of international concern, a rare designation given to worldwide public health threats. The effects of COVID-19 worldwide are already unprecedented. As of this writing, the number of deaths continues to climb, already surpassing the SARS epidemic of 2002-3 [1]. In the United States, a White House proclamation is currently barring any non-US residents who have been in China in the past 14 days from entering the country. Multiple other countries have followed suit, including restricting air travel to and from China for an indefinite period of time. While these steps are extreme, they have been taken to prevent further spread of this new virus, as scientists and public health experts race to understand the transmissibility and severity of the virus.

Rumors, half-truths, and misconceptions, historically a huge problem during epidemics, have emerged, particularly among social media. This is where the nurse has an important role to play in addressing and clarifying facts about the virus directly with their patients. Already, concerns about acute shortages of supplies such as masks and gloves in hospitals and health care settings are growing, as media images of huge crowds wearing face masks may spur hoarding of these much needed medical supplies. In fact, the Centers for Disease Control does not recommend wearing a mask for those who are well [2]. Also concerning is the xenophobia that results from these rumors and misconceptions. Perhaps the most relevant for emergency nurses is the fact that minor symptoms of the common cold may send increased numbers to emergency department and health care offices, making it more challenging to identify and treat actual suspected cases [3].

Emergency nurses are on the front lines of this and other such challenges, and they can best support their patients and themselves by staying informed about the latest updates. Right now, knowledge is rapidly developing about the transmission, severity, and other concerns associated with COVID-19 as the outbreak investigation is still evolving [4]. In this time of uncertainty, when the effects of COVID-19 spread are still largely unknown, emergency nurses can lean into established infection control and emergency preparedness protocols to care for their patients, and to ensure their own personal safety. Not only have these guidelines been established with experience, and with care, they have been designed and tested to be broadly applicable. They are the best things we have to depend on. Practicing universal precautions, which means taking measures to avoid direct contact with bodily fluids,

is a basic nursing skill and the number one action that can both protect ones safety and prevent spread of the virus. Regularly reviewing the most accepted sources of health information, such as that from the Centers for Disease Control [2,3], World Health Organization [5], and from country-specific public health organizations, are the best ways to stay up to date on any changes. This includes being aware of any patients that might meet the symptom criteria for further evaluation and knowing how to report a potential case to local public health authorities. Currently, while the majority of cases remain centered in China, the WHO director general Dr. Tedros Adhanom Ghebreyesus described the virus as one that "holds a very grave threat for the rest of the world" [6]. The current response—happening on a global scale—is a test of the worldwide, and country-specific capacity, to respond to epidemics. If anything, we know that global disease outbreaks such as the current COVID-19 will continue to be a concern, and we can use this opportunity to learn to prepare for the next one.

While COVID-19 is central to our thinking currently, it is an important time to consider other threats facing us, namely climate change and the resulting effect on the health of our populations. Unprecedented disasters such as hurricanes, floods and wildfires, are wreaking havoc on multiple continents. The world's five warmest years on record have all occurred since 2015 with nine of the ten warmest years occurring since 2005 [7]. These changes are endangering our planet as well as ourselves and prominent nursing organisations are highlighting the essential role that nurses have to play in public health, clinical care, emergency services, research, and advocacy to reduce and respond to these health consequences [8]. We also need to be asking ourselves if we are educating and preparing our nurses to be able to meet these challenges. Specifically, what kind of emergency nurse do we need in the immediate future, and are our current educational programmes responsive enough to meet these demands? There needs to be integration into basic, advanced and professional nursing education regarding how to address these adverse health impacts and the nurses role therein [8]. It should also be noted that technology is advancing at a rapid rate and we constantly hear about the advances in health care regarding the use of robots and artificial intelligence, with the estimate by the McKinsey Global Institute that 800 million workers worldwide will be replaced by robots by 2030 [9]. What are we doing as nurses to ensure we remain relevant practitioners of nursing care in a technologically advanced future, how do we advance the uptake of technology to improve patient care? Are we sufficiently prepared and have we effectively planned for the necessary changes needed in nursing education to cope in the 4th industrial revolution? [10].

During times of crisis and challenge, the public looks for—and needs—sources of trusted information. Now is the time for nurses, the largest health workforce, to take the lead in supporting the health of the public through education. Nurses are respected worldwide for their trust and ethics in providing care to individuals and the public. In fact, polls in the U.S., U.K. and Australia all rank nurses as the most trusted

profession [11,12]. We can use our numbers, combined with our voices, to be leaders in dispelling panic and fear. We are already known to be the source for promoting health and preventing disease. We can use these skills to provide knowledgeable facts about health to the public. We can demonstrate principles of public health, such as emphasizing the importance of handwashing. We can work to dispel rumors and acts of xenophobia. We can advise individuals to stay home if they are ill, and we can share information about when it is necessary to seek health care.

This year, with the global focus on our profession, it is the time to raise the status of the nurse and ensure the visibility of nurses. We thank the World Health Organization for spearheading these efforts. The current nursing image is often permeated by historical, socioeconomic and cultural aspects and the public is often unaware of the importance of nursing. Misconceptions about nursing are still in the mainstream, where too often we are seen as working by supporting or coordinating in the background. Our profession is fundamental to health care, and too valuable to allow these misconceptions to persist. In this, the year of the nurse, our call to action as emergency nurses is to do more to advance nurses as leaders of health and health care and fierce advocates for our patients. We need to create new ways of teaching nurses to prepare for new global challenges. We need to use our nursing skills to address global health equity. We need to create resilient emergency nurses of the future who will be able to adapt and cope with new and unknown health challenges.

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