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Guest Editorial

Sustainable development & the year of the nurse & midwife – 2020

The year 2020 marks the 200th anniversary of Florence Nightingale's birth and the 100th of her death. The World Health Organization is marking the year by highlighting the contributions of nurses and midwives to healthcare systems around the world, designating it as the year of the nurse and midwife.

In support of that endeavor, we have assembled a collection of global voices of nurses, midwives, and their interdisciplinary partners for an editorial series highlighting nurses and midwives contribution to achieving United Nations Sustainable Development Goals (SDGs). The sustainable development goals are the next evolution of the Millennium Development Goals with one key difference: The sustainable development goals are for all countries, not just low- and middle-income ones. A collection of 17 global goals, the sustainable development goals are the first time humanity has come together to agree on key areas for promoting a better quality of life for all people, regardless of where they live, work, and play.

The sustainable development goal central to nurses and midwives is #3: Good Health and Well Being. While meeting this sustainable development goal, nurses and midwives contribute directly and indirectly to all of the other sustainable development goals. Our capacity to do so, however, is often limited by the ability to organize and mobilize resources, including partnerships, to address the goals more broadly through our work. Therefore, we will use our collective voices in this editorial series to highlight where partners can invest financial, social or political capital in nursing and midwifery to maximize their contribution to achieving sustainable development. As many global health partners know, there is much truth in the adage "*when you want to get something done, put it in the hands of nurses and midwives*".

Our interest in this issue is also a response to the *Lancet*'s series on the quality of health care globally (Kruk et al., 2018a). High quality care capable of meeting the sustainable development goals cannot be achieved unless our intertwined professions leave past practices behind and foster supportive working environments for all. Failures in our health systems are contributing to early deaths and disability across the world, regardless of income level (Kruk et al., 2018b). The statistics which highlight that 8 million lives annually are lost just due to quality issues in care delivery show where health care professionals are not contributing to achieving the sustainable development goals, thus it is why the team called for a revolution that will strengthen health systems to improve quality of care and help meet them.

Strengthening the impact of nursing and midwifery is central to attaining improved health for all through sustainable development. The *Declaration of Astana* (World Health Organization [WHO] & United Nations Children's Fund, 2018) calls for achieving universal health coverage through the provision of quality primary healthcare access for all. The skills of nurses and midwives, as the largest healthcare cadre, are essential for achieving such an aspiration. The vision of the World Health Organization's *Global Strategic Directions for Strengthening Nursing and Midwifery, 2016–2020* World Health Organization, 2016 World Health Organization's *Global Strategic Directions for Strengthening Nursing and Midwifery, 2016–2020* also articulates the need for a robust nursing workforce capable of measurable contribution to both universal health coverage and the sustainable development goals. We anticipate the next report will reflect advances made and where opportunities exist related to the sustainable development goals.

The significance of the sustainable development goals is that they reflect the holistic sensibilities of nurses in this time of worldwide public health improvement and global redistribution efforts toward social and health equity. Data and new research that more closely examines the interplay between the structural elements of health systems, workers, and patients on outcomes is also sorely needed to meet #3 at the very least (Kruk et al., 2018a; Leslie et al., 2018). Research specific to nurses and midwives is also critical—even if it reveals problems to be addressed. Each country needs to identify key areas of opportunity for public and private investment in strengthening nursing and midwifery to meet population health needs.

Also important for understanding the contributions of nurses and midwives globally is a clear description and classification of nursing and midwifery personnel and an accurate headcount to guide priority areas for investment (Squires et al., 2016). It is time to modernize credentialing and licensure systems in ways that are internationally compatible and provide accurate numbers that reflect a country's actual nursing and midwifery human resources capacity. Tanzania is a country that made a herculean effort in the early 2000s to get their personnel numbers correct, as one example. It helped highlight the depth of the shortage in the country and policymakers understood where the critical distribution problems were with concrete evidence instead of anecdotal field stories.

The right number of nursing and midwifery services are critical to achieving high quality health systems, yet the infrastructure to properly train sufficient numbers is often lacking or based on outdated funding models. Universal health coverage will help provide the necessary funds to support the increased training and

hiring of nurses and midwives to increase access to care through an enhanced health system. Moving toward standardizing nursing and midwifery (and nurse-midwifery) education globally will also go a long way to improving quality of care.

There are massive opportunities to improve nursing education around the world and several planned editorials in this series will address the topic. Even though nurses and midwives can migrate for work around the globe, the education is not always equivalent nor is their baseline knowledge appropriate for practice in another country. A nurse from a high income country, for example, who goes to work in a low or middle income country where Malaria is endemic and has had no training or experience in managing patients with the disease is no safer to practice than a nurse who moves to practice in a high resource environment who has never used a heart monitor because the technology does not exist in her country.

At the same time, both nursing and midwifery must recognize and vocalize our professional contributions to the user experience and patient satisfaction, along with other health outcomes. Technology has the potential to help us improve the overall patient experience and link us together to help resolve challenging cases. Recognizing where we can all do better in care delivery for our patients and their experiences will be a critical toward creating a sustainable nursing and midwifery workforce in each country. Now it is time to work in a spirit of global solidarity to ensure safe and healthy work environment to retain the nursing workforce where they are most needed.

The issues highlighted above are just a starting point for our discussions that will take place over the next year about how nurses and midwives can contribute to achieving the sustainable development goals. Expect to see voices from around the world as we do our best to create an inclusive editorial series that will contribute to the global dialogue about nursing, midwifery, and the sustainable development goals.

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Allison Squires*
International Education, Rory Meyers College of Nursing, Langone School of Medicine, New York University, 433 First Avenue, New York, NY, 10010, USA

Freida S. Chavez
Bloomberg Faculty of Nursing, Dalla Lana School of Public Health, University of Toronto, Canada

DeAnne K. Hilfinger Messias
College of Nursing and Women's and Gender Studies, University of South Carolina, 1601 Greene Street, Columbia, SC, 29208, USA

Georgia L. Narsavage
West Virginia University School of Nursing, Morgantown, WV, 26505, USA

Daniel B. Oerther
Missouri University of Science and Technology, Rolla, MO, 65409, USA

Shahirose Sadrudin Premji
School of Nursing, Faculty of Health, York University, Toronto, ON, M3J 1P3, Canada

William E. Rosa
RWJF Future of Nursing Scholar, University Pennsylvania School of Nursing, Philadelphia, PA, 19104, USA

Zainab Ambani
King Saud bin Abdulaziz University for Health Sciences, Saudi Arabia

Hortensia Castañeda-Hidalgo
Facultad de Enfermería de Tampico, Universidad Autónoma de Tamaulipas, Mexico

Hyeonkyeong Lee
Yonsei University College of Nursing, 50 Yonsei-ro Seodaemun-gu, Seoul, 120-752, South Korea

Eunice Siaity Pallangyo
School of Nursing and Midwifery, Aga Khan University, 344 Urambo Street, PO Box 38129, Dar es Salaam, Tanzania

E. Brie Thumm
University of Colorado College of Nursing, Denver, CO, USA

* Corresponding author.
E-mail addresses: aps6@nyu.edu (A. Squires),
freida.chavez@utoronto.ca (F. Chavez),
deanne.messias@sc.edu (D. Hilfinger Messias),
gnarsavage@hsc.wvu.edu (G. Narsavage),
oertherd@mst.edu (D. Oerther),
premjis@yorku.ca (S. Premji),
wrosa@nursing.upenn.edu (W. Rosa),
zainabambani@gmail.com (Z. Ambani),
hcastane@docentes.uat.edu.mx (H. Castañeda-Hidalgo),
hlee39@yuhs.ac (H. Lee),
eunice.siaity@aku.edu (E. Pallangyo),
briethumm@gmail.com (E. Thumm).