



MEETING'S
PROCEEDINGS

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American Academy of Nursing Policy Dialogue

Lessons from the COVID-19 Pandemic: Mobilizing Nursing Leadership to Advance Global Equity



Hosted by the Expert Panel on Global Nursing & Health in
collaboration with the Expert Panel on Health Equity

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Dialogue Occurred
**DECEMBER
2022**

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INTRODUCTION

In December 2022, the American Academy of Nursing (Academy) hosted a policy dialogue on “Lessons from the COVID-19 Pandemic: Mobilizing Nursing Leadership to Advance Global Equity.” The Academy’s Expert Panel on Global Nursing & Health, in collaboration with the Expert Panel on Health Equity, convened this dialogue to discuss policy issues and strategies to ensure more equitable distribution of resources such as vaccines, increase equity in the U.S. and abroad, and support nurses as they engage and emerge from the COVID-19 pandemic. Nurses in all settings continue to be at the forefront of COVID-19 prevention, management, emergency response, strategic planning, and workforce sustainability efforts.[1] This policy dialogue provided participants the opportunity to gain insights from leading experts on the need for increased attention to the emotional, financial, and physical recovery of the nursing workforce. The dialogue explored the critically important policy implications related to these issues and how the profession can advance them.

This document contains highlights of the event, including:

- Summaries of the main session guest speaker content as well as the question and answer session with the guest speakers;
- Key take-aways; and
- Recommendations for nurses to engage with policies that address health inequities and deliver optimal health care to all.

ABOUT THE AMERICAN ACADEMY OF NURSING

The American Academy of Nursing serves the public by advancing health policy and practice through the generation, synthesis, and dissemination of nursing knowledge. Academy Fellows are inducted into the organization for their extraordinary contributions to improve health locally and globally. With more than 3,000 Fellows, the Academy represents nursing’s most accomplished leaders in policy, research, administration, practice, and academia.

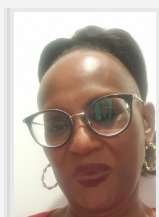
Expert Panels are one of the major forces within the Academy for developing new knowledge to transform health policy. Through consensus building and collaboration, Academy Expert Panels advance evidence-based solutions to the most complex health care challenges. By hosting Policy Dialogues, Expert Panels lead engaging discussions to further enhance awareness and develop policy proposals that work to achieve the Academy’s vision of healthy lives for all people.

Featured Speakers



Sheila M. Davis

DNP, ANP-BC, FAAN
Chief Executive Officer
Partners In Health



Judy N. Khanyola

RCHN, MAHP, PGCert, FAAN
Chair, Center for Nursing and
Midwifery
University of Global Health Equity



Pamela F. Cipriano

PhD, RN, NEA-BC, FAAN
President
International Council of Nurses

Main Session Summary

Sheila M. Davis DNP, ANP-BC, FAAN
Chief Executive Officer, *Partners in Health*

Dr. Sheila Davis is the CEO of Partners In Health (PIH), a global health nonprofit organization rooted in social justice that works in 11 countries. Dr. Davis's early nursing career focused on the HIV/AIDS community in the U.S., and she went on to work in multiple countries responding to the global HIV pandemic. She also served as a clinician in the Infectious Diseases Clinic at Massachusetts General Hospital and as Chief of Ebola Response at PIH during the epidemic in West Africa. Dr. Davis is a frequent national speaker on global health and clinical topics including HIV/AIDS, the Ebola epidemic, leadership in public health, and the role of nursing in human rights. In her remarks, Dr. Davis discussed the impact of the COVID-19 pandemic in illuminating inequities within health care systems.

Emerging global pandemics have always posed high risks for individuals, families, and communities.[1] This includes people who are medically underserved and people who live or work in settings that put them at a higher risk of becoming infected or exposed to hazards in both rural and urban areas. Moreover, factors related to stress, physical and mental health, and inequities present in the nursing workforce were exacerbated by the COVID-19 pandemic.[2] During the pandemic, nursing leaders developed community-based approaches and solutions to challenges that impacted the nursing workforce, access to care, and vaccines locally, nationally, and globally.

"COVID-19 was unique in many ways...[it] had a global impact but did not impact everyone equally— and that is key, as it showed us that disasters can highlight severe inequities."
Sheila M. Davis

Investing in prevention and preparedness before pandemics occur leads to more robust health systems that can better respond when emergencies arise. Dr. Davis discussed PIH's partnerships with communities and the public sector to support strong health systems within the U.S. and globally.

Specifically, Dr. Davis outlined effective and comprehensive strategies to bolster health systems and pandemic-specific responses globally, including prioritizing access to diagnostics and therapeutics, distributing vaccines equitably, and investing in health infrastructure, including laboratory capacity. She also shared that by partnering with communities, especially those in low-income and low-resource settings, health systems can be built to meet local needs. Nurses have an important role in this, and those who are systems-oriented and connected with communities are best suited to assume leadership roles in influencing how care should be delivered globally. “Our best way of combating pandemics like COVID-19 is to invest in these comprehensive strategies now. We need to ensure that we're able to respond by having strong health systems,” Dr. Davis concluded.

**Judy N.
Khanyola**

RCHN, MAHP, PGCert, FAAN

Chair, Center for Nursing and Midwifery, *University of Global Health Equity*

Judy Khanyola’s work focuses on equipping the nurses and midwives in Rwanda to provide care to the full extent of their education and training as health professionals. She has made it her mission to ensure that the majority of populations in Africa receive care delivered by experienced and compassionate nurses and midwives. In her remarks, Ms. Khanyola discussed the impact and injustices of the COVID-19 pandemic on Rwanda and other regions of Africa, focusing on the importance of leadership and compassion within the health care workforce.

Ms. Khanyola focused on vaccine equity in the fight against COVID-19 as a major issue in many countries in Africa due to various factors. For example, the Pfizer vaccine required refrigeration at -80 degrees Celsius, which was beyond the ability of many African countries. Rwanda became the first country in Africa to begin vaccinating its population of about 12 million, a testament to its strong leadership, while some larger and economically stronger African countries, due to corruption and poor leadership, took longer to commence COVID-19 vaccination of their populations. Ms. Khanyola further discussed the added stressors of injustice related to poverty, access to care, and education that impact most African countries and how the nursing workforce works to educate the communities to live healthy lives through strong leadership. “When you educate a woman in Africa, you are educating the community, because this woman will do her very best for her family, which in turn has a future ripple effect on the community due to improved education, hygiene, and health,” Ms. Khanyola shared.

Ms. Khanyola highlighted how nurses and midwives are the health care professionals best suited to maintain and improve the quality of care received by patients, thus advancing global health equity. She discussed how a majority of Africans reside in rural areas where there are no licensed health professionals.

“Nurses who are well trained will provide compassionate and competent care, bringing knowledge and dignity to Africans and ultimately advancing global health equity.”

Judy N. Khanyola

Pamela F. Cipriano PhD, RN, NEA-BC, FAAN
President, International Council of Nurses (ICN)

Dr. Pamela Cipriano has extensive experience as an academic medical center executive and her career is marked by a focus on improving the quality and safety of services and the work environment for all staff. Her current leadership role with the National Academy of Medicine's Action Collaborative on Clinician Well-Being and Resilience is focused on addressing the psychological safety and support for caregivers experiencing stress and burnout, particularly as a result of the COVID-19 pandemic. In her remarks, Dr. Cipriano discussed efforts to advance the influence, impact, and visibility of nurses.

She emphasized three goals to achieve universal health coverage, which includes making sure more individuals have health coverage, that they receive high-quality care, and that they are not pushed into poverty for seeking health care. Dr. Cipriano also discussed the lessons learned from the pandemic on how to keep nurses and other health care workers safe and equipped to address the social and economic factors such as income, education, employment, community safety, and support globally to ensure patient safety. Like Dr. Sheila Davis and Ms. Judy Khanyola, she focused on the importance of investing in health systems, the leadership of nursing, protecting and safeguarding all health care professionals, and vaccine equity.

During the pandemic, nurses were risking their health to help those suffering from COVID-19. At times, they faced harassment, stigmatization, and even attacks. [4] Dr. Cipriano discussed how the ICN provided webinars and issued statements calling on governments to commit to ensuring the protection and safety of nurses and other health care workers. This is especially important because these factors, including the lack of protection for nurses from the virus and physical violence from patients, have contributed to workforce shortages globally.

Dr. Cipriano also highlighted the effect the COVID-19 pandemic had on the mental health and well-being of nurses and other health care workers, individuals, families, and communities. She also pressed the need to prevent, mitigate, and invest in the impacts of this crisis.

"This is our time for asking for a new normal where nurses are respected and valued and disadvantaged communities have access to care. This is our time to issue our manifesto for change in nursing."
Pamela F. Cipriano

Question and Answer Session

What steps are underway or could be taken to ensure nurses are prepared for a future pandemic to prevent inequity in care and protections for the workforce?

Dr. Cipriano called for nurses to be in top leadership positions to partner with governments and other leaders to create close communication with ministers of health and experts who are on the frontlines. She added, "We need the voice of nurse leaders immediately when we sense something is happening for an on-the-spot response." Dr. Cipriano highlighted the importance of valuing nurses and other health care workers to retain a robust workforce, not forgetting to protect and readily support nurses as they step up in communities and address disparities and access to care.

What can we do to harmonize the training of nurses and midwives in Africa to allow for the production, retention, and absorption of a skilled workforce?

Ms. Khanyola discussed that health care workers and systems should move away from previous strategies that only waste resources. She voiced that there is a need for harmonizing nursing competencies globally. She attested to the opportunities she received to work outside of Africa to advance global equity. Ms. Khanyola highlighted the need for investing in nurses and the workforce and the opportunity for trained nurses and midwives to share their skills globally to combat inequities in access to care.

How can we invest in health systems to be better prepared for the inevitable next global emergency?

Dr. Davis explained that it starts with asking: “What are the components of health care needed? What is needed for an effective pandemic response?” As an example, she stated that there is a need for adequate oxygen and suggested that, rather than using funds to purchase oxygen from outside sources to satisfy only the emergency response, funding should be used to build an oxygen plant to meet short-term needs as well as make long-term impacts across the health system. It is important to make access to quality care available at the community, secondary, and tertiary levels. Dr. Davis also spoke about making long-term investments in training to build expertise in specialty areas among nurses and the health care workforce so that we can better respond to global emergencies like the COVID-19 pandemic.

So much of the pandemic response was a lack of effective prevention measures at the community or country level. How do we see nursing more involved in prevention?

Dr. Davis stated that by expanding our view of public health, rather than seeing it as siloed from care, the nursing workforce would have a stronger impact on prevention. She added that nurse leaders should be pushing care and public health into the community while ensuring that there is a feedback loop into the hospital and clinical care systems as well as recognizing public health as a forward arm of the health system rather than a separate specialty.

How can schools of nursing prepare faculty and student nurse leaders in this area?

Dr. Cipriano discussed the need for providing resources through the use of position statements that can be used as toolkits. She added that it is important to show the success of nurses being bold in moving the needle on improving nursing regulation locally, nationally, and globally through advocacy, getting laws passed, negotiating with governments for wages, and restoring a focus on public health to strengthen the nursing workforce.

Why are community health workers and nurses critical to an equitable public health system?

Dr. Davis stated that nurses are instrumental in every aspect of care and community health workers strengthen the feedback loop from the community to the clinic. She explained that nurses can help make community health workers more effective as part of an integrated system for quality care. She discussed the need for nurses and health care workers to provide expert health care, but also comprehensively address issues of social support and reinforce models of health care delivery that directly engage communities and families and then link to hospitals.

Key Takeaways

Nurses are integral in building and advocating for safety net care in their local communities.

Safety net care is essential to uninsured, Medicaid, and other vulnerable patients, yet it is often lacking or absent within health care systems. Safety net care goes beyond the delivery of high-quality care, to the need for clean water sanitation. Nurses, working with local, state, and national governments, have the experience to demonstrate the necessity of safety net care for vulnerable communities when support systems are not in place. Legislation that addresses the severe health inequities of care when large-scale health crises occur should be sought after.



The health care system must prepare now and continually reevaluate community needs to prepare for the next global pandemic or public health crisis.

Nurses and the health care workforce are capable of emerging from this pandemic stronger than before, but should review and rectify the underlying deficiencies within healthcare systems that prevent the workforce from providing high-quality, cost-effective, and accessible universal health care. The importance of nurses as leaders and partners in their communities is crucial and ensures well-trained and compassionate nurses are providing high-quality care to their communities to eliminate suffering and alleviate economic stressors.



The nursing workforce's well-being must be supported in order for the profession to address inequities.

Nurses reported high levels of depressive symptoms, tiredness, and anxiety during the COVID-19 pandemic. The National Academies of Science, Engineering, and Medicine's report entitled *The Future of Nursing 2020-2030: Charting a Path to Achieve Health Equity*[5] warns of increasing rates in the profession of poor mental health, including substance use disorders, and suicide. Legislation and regulatory policies that reinforce healthy work environments through advancing workplace safety by allocation of sufficient resources, standardization of security guidelines, and federal funding to increase access to evidence-based mental health and substance use disorders treatment are essential to the nursing workforce.



Recommendations

1. Expand policies, resources, and federal incentives for health care systems to promote the mental health and well-being of nurses and other health care workers, individuals, families, and communities.
2. Increase funding for the public health infrastructure globally to improve prevention and earlier detection of major global health threats, as well as improve global coordination as threats are identified.
3. Coordinate with local, state, and national governments to address health disparities by advocating for system reforms that ensure resources (i.e. workforce deployment, vaccine access, safety net care) are equitably distributed to traditionally under-resourced communities when public health emergencies occur.
4. Advance research initiatives that further illuminate the impact COVID-19 had on communities, individuals, and health care providers to build the body of evidence for systems reform that addresses all aspects of the social and political determinants of health.
5. Implement national strategies through the Occupational Safety and Health Administration that protect the health and safety of essential and non-essential workers from global health threats.

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Acknowledgements

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