



Nursing humanities, nurturing compassion: sustaining the global nursing and midwifery agenda

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“Nurses and midwives are the backbone of every health system: in 2020 we’re calling on all countries to invest in nurses and midwives as part of their commitment to health for all.”

- Dr Tedros Adhanom Ghebreyesus, Director-General, WHO

As per the World Health Organisation (WHO), nurses and midwives account for nearly 50% of the global health workforce but their absolute numbers are inadequate with the most shortages seen in South East Asia and Africa.[1] India has a shortage of an estimated 20 lakh nurses and a skewed nurse-

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population ratio of 1:2500.[2] These figures assume significance in a country as vast and as diverse as India, where nurses are often the first and sometimes the only healthcare professionals that sick people see; this is especially so in rural areas where 70% of the population resides.

If we are to achieve universal health coverage by 2030, we need greater investment in the development of a compassionate and competent nursing and midwifery workforce. With the World Health Assembly having designated 2020 the International Year of the Nurse and the Midwife, this is the right time to enhance infrastructure and strengthen training.

The Indian Nursing Council (INC) is an autonomous body under the Ministry of Health and Family Welfare, India, and it was established to regulate and to maintain uniform standards of nursing education all over the country; however, in 2005, the National Commission on Macroeconomics and Health reported the results of a survey that concluded that 61% of all nurse training institutions in the country did not meet INC standards.[3]

An additional concern is that the Indian Nursing Council Act has seen minimal amendment since 1947, with the last one being made in 2006. Thus, while the Medical Council of India has transformed the medical curriculum in 2019 into a competency-based one in keeping with global norms, the Nursing Education Committee under INC has yet to revise the nursing curriculum. It is imperative that this be done at the earliest. They could consider incorporating the Nurse Educator Core Competencies which were identified by the WHO in 2016 to enable educators to effectively contribute to the attainment of high-quality education, and the production of effective, efficient and skilled nurses who are able to respond to the health needs of the populations they serve.[4]

The challenges in nursing education and practice could be overcome through the transformative scale-up of nursing and midwifery education. The INC has already made attempts in this direction. It launched

the Nightingale Challenge in 2019, where it asked employers to identify young nurses and midwives (under the age of 35 years) who could undergo leadership training.[5] This initiative is the result of Nursing Now, a three-year global campaign (2018-2020), which runs in collaboration with the WHO and the International Council of Nurses with an aim to improve health by raising the profile and status of nursing professionals worldwide.

The WHO core competencies for nurse educators are ideal to attain social accountability - a key component of the WHO's global toolkit for evaluating health workforce education. This will be critical in the move towards universal health coverage. However, where we rely on the biomedical models of care, we need to change over to the compassionate care model so as to foster nurse-patient relationships.[6,7] It is important that nurses are educated and trained to explore humanitarianism, a concept that is embedded in the disciplines that have not yet been included in nursing education.[7]

"So it is with reading to the sick, I have often heard a patient say to such a mistaken reader, 'Don't read it to me; tell it me.'"

- Florence Nightingale

2020 also celebrates the 200th anniversary of the birth of Florence Nightingale, who had great influence over nursing in India and brought reforms in military and civilian hospitals in 1861. She once said that sick children prefer storytelling and, in a way, laid the foundation for the Nursing Humanities which are tools that can enhance patient-centered care through the use of arts-based initiatives, narrative medicine, poetry, and interprofessional interactions, among others.[7]

The Nurse Educator Core Competencies encompass eight broad domains.[5] Many of these can be attained through incorporating the Nursing Humanities into the curriculum; for example, a grounding in Nursing Humanities can provide a safe forum for discussion of difficult and threatening issues (ethical/legal principles and professionalism); assist in the management of change and in

decision making (management, leadership and advocacy); encourage more inter-professional care (communication, collaboration and partnership); provide improved learning and extend concepts of care (theories and principles of adult learning); it can also help learners deal with stressors that lead to nursing burnout.[6,7]

connects different regions as well – rural with urban, coastal with desert – all the spaces where nurses perform their healing activities. The hues, especially the change from darkness to light as we move up the canvas, elicits a calming response much as a compassionate nurse might be expected to deliver.

The cover of the journal as we greet the new year in 2020 captures diversity and reminds me of the global nursing and midwifery agenda. The dark shades in the image represent difficult conditions in which nurses and midwives work. The different shades of orange that envelop the landscape indicate strength and courage. The artwork to me

In celebration of the WHO theme for this year, RHiME invites researchers to explore the interface of the humanities with nursing and medicine, to examine their contribution to compassionate care, social justice and the protection of human rights, and to delve into nursing advocacy and the visibility of nursing identity.

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