



**Nursing** now

# Agents of Change:

the story of the Nursing Now campaign

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To mark 2020, Year of the Nurse and the Midwife, Jhpiego, Nursing Now, and the International Council of Nurses, hosted the global NursingInFocus photo contest to highlight the impact, influence, and diversity of nurses across the world. Some of the over 2,000 entries are featured in this report and you can find out more about this contest here: **<https://yearofthenurseandmidwife.org/>**

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### Acknowledgements



ICAP/Sven Torfinn



Guy's and St. Thomas' NHS Foundation Trust

# Preface

**The COVID-19 pandemic has revealed the extraordinary debt that we all owe to nurses and other health workers. Nurses across the world have played a crucial role in the COVID-19 response and have brought their expert clinical skills and compassion to all settings – in the community advising and providing support and information, in primary care and hospitals caring for the sick and the dying and working in the most stressful intensive care environments. Now it is time to invest in the nursing workforce and develop a global culture in which nurses' contribution to healthcare is truly valued.**

We have been privileged to be part of the Nursing Now campaign and have seen for ourselves the passion, energy and activity it has generated in countries all around the world. Nurses make an enormous contribution to achieving universal health coverage and improving health globally and could do even more with the right resources and support.

Nursing Now was designed to improve health globally by raising the profile and status of nurses and this report shows that this is happening in many countries with new services, new investment and new energy. The Year of the Nurse and the Midwife and the publication of the first ever *State of the World's Nursing* report have added to the momentum. In addition, the publication by the World Health Organization (WHO) of the Strategic Directions for Nursing and Midwifery sets

the direction for the next decade and focuses on jobs, leadership, pre-service education and practice.

This is only the beginning. We must all build on the step change created by the Nursing Now campaign to secure continuing and sustainable improvements in the future.

We are grateful to Nursing Now's Executive Director, Barbara Stilwell, and her colleagues for everything they have done for the campaign, and to the Burdett Trust for Nursing who have hosted Nursing Now.

It is what happens locally in communities, cities and countries around the world that is, of course, of most importance and we congratulate and thank everyone involved in this campaign in all parts of the world for your great work now – and in the future.



**Lord Nigel Crisp,**  
Co-Chair, Nursing Now  
Campaign Board



**Professor Sheila Tlou,**  
Co-Chair, Nursing Now  
Campaign Board



**Dr Tedros Ghebreyesus  
Adhanom,**  
Director General, World  
Health Organization



**Annette Kennedy,**  
President, International  
Council of Nurses

# Report summary

**The story of the Nursing Now campaign is of nurses and their allies coming together around the world, growing in influence, and building a platform for improving health and health care for the future. There are now more than 800 independent and self-funding Nursing Now groups in 126 countries and more than 31,000 young nurses and midwives have participated in the Nursing Now 'Nightingale Challenge'.**

Many governments and health leaders have responded: 24 countries have invested more in nursing in response to the campaign, more than 800 employers have set up development programmes for young nurses and midwives, and there are now many more nurses on boards and in positions of influence.

There is global momentum and energy, and change is underway – driven by the passion and skills of nurses and accelerated by social media and digital technology, which connect nurses to each other and offer them a platform to share their messages.

***The core message of this report, and the whole Nursing Now campaign, is that nurses are vital agents of change who can improve health and transform health care. Governments that want to see health improvements reaching every part of their populations – and leaving no one behind – need to invest in nursing and enable nurses to work to their full potential. This report shows that all governments and health leaders must understand and act on this message.***

The Covid-19 pandemic has made nurses even more visible at the heart of every health team. Nurses have been with their patients at every step of the way – from the community to intensive care – providing intimate, personal care and looking after mental and physical well-being. They have innovated and adapted – as true agents of change – working alone and with colleagues in multidisciplinary teams to find solutions to the new problems that Covid has presented.



The QNI/Nursing in Focus

But Covid has also reminded us that nurses are too often under-valued and their work taken for granted, unable to make their best contribution. The experience of the pandemic should serve as a spur for action. All governments and health leaders now need to respond by investing in nurses, providing good working conditions and environments, strengthening education and support, and enabling nurses to take on wider roles as service designers and leaders, practitioners and specialists, and agents of change in health care and in public health.

Last year's *State of the World's Nursing report*<sup>1</sup> and the World Health Organization's (WHO's) newly published *Strategic Directions for Nursing and Midwifery*<sup>2</sup> set out clearly the challenges that have resonated with nurses, and also what needs to be done to ensure that more nurses are recruited, properly educated and kept in the workforce. The newly launched Care Compact,<sup>3</sup> marking the WHO Year of Health and Care Workers, recognises

<sup>1</sup> World Health Organization (2020) *State of the World's Nursing 2020*, Geneva: World Health Organization, <https://www.who.int/publications/i/item/9789240003279>

<sup>2</sup> World Health Organization (2021) *Strategic Directions for Nursing and Midwifery, 2021-2025* Geneva: World Health Organization. <https://www.who.int/publications/m/item/global-strategic-directions-for-nursing-and-midwifery-2021-2025>

<sup>3</sup> World Health Organization (2021) 'Year of Health and Care Workers 2021', <https://www.who.int/campaigns/annual-theme/year-of-health-and-care-workers-2021>



the responsibilities that countries have to their health and care workers. As this report shows, many countries are already investing in nursing and others need to follow if they want to make rapid, cost-effective and high-quality improvements in health.

Strengthening nursing will strengthen the whole health team and the whole health and care system. It is one of the most important things that can be done to improve health globally.

## The Nursing Now campaign

The aim of the Nursing Now campaign was to improve health globally by raising the status and profile of nursing; and it is a health campaign as much as it is a nursing one.

The campaign originated with a report from a group of UK parliamentarians in 2016 entitled *Triple Impact*, which argued that strengthening nursing would make a major contribution to three Sustainable Development Goals (SDGs): improved health, greater gender equity and economic development.<sup>4</sup> The campaign was

launched in February 2018 and the Burdett Trust for Nursing included the campaign as part of its activities and provided the majority of core financial support throughout. The campaign was run in association with the WHO and the International Council of Nurses (ICN).

The campaign was designed to be inclusive, avoiding duplication of effort and welcoming organisations and individuals from nursing and beyond as allies and partners. The campaign did not represent nurses as the ICN does, and national groups did not seek to set standards as WHO does. Rather, the focus was on the impact nurses have on health and society and to strengthen their role as leaders, service designers and advocates – true agents of change for improvement.

The campaign was vision-led and entrepreneurial, learning by doing, and designed to encourage activity and enterprise at every level – from the most local to the global. It identified areas for development including advanced practice, research capacity, leadership development, education and, of course, investment, rather than specifying top-down targets. It was keen to

<sup>4</sup> All-Party Parliamentary Group on Global Health (2016) *Triple Impact: How developing nursing will improve health, promote gender equality and support economic growth*, London: APPG on Global Health, <http://www.appg-globalhealth.org.uk/reports/4556656050>



avoid imposing specific models of nursing on countries and recognised that everyone has something to teach and something to learn. Its definition of nursing was deliberately inclusive: nurses were defined as people who have had a professional education and are registered in the country where they work.

Nurses and their allies responded magnificently. A Tanzanian group set up the first Facebook page even before the campaign launched and people from 126 countries followed with their own initiatives. The first national group to be founded was Uganda in early 2018, followed soon by Jordan, and the last was Saudi Arabia in January 2021. In between were many remarkable campaign launches: the Koreans attracting 5,000 nurses to a meeting; the Russian Minister of Health speaking to 2,000 nurses in a webinar; and the Pakistan President committing £130 million of investment at the country's

Nursing Now campaign launch. And every one of the local, national and regional groups was self-supporting.

The 'Nightingale Challenge' was launched in 2019 as a challenge to all employers of nurses to provide development opportunities for young nurses and midwives. More than 800 employers responded, evenly split between the public and private sectors. More than 31,000 young professionals have been involved, with India leading the way with about 8,500 young nurses signed up.

There have been global achievements, for example: advocating for 2020 to be the Year of the Nurse and the Midwife; successfully working with the WHO and the ICN to research and publish the first ever *State of the World's Nursing* report;<sup>1</sup> and, with our partners, raising the profile and contribution of nursing within global policies in areas such as universal health coverage, non-communicable diseases, gender equality and primary care.

<sup>1</sup> World Health Organization (2020) *State of the World's Nursing 2020*, Geneva: World Health Organization, <https://www.who.int/publications/i/item/9789240003279>



However, the most remarkable achievements have been national, where Nursing Now groups have influenced policy and investment in many countries. Sixty-three groups report increased investment in nursing during the campaign, with some evidence that in 24 countries investment was directly influenced by local Nursing Now groups. There has been an increase in nurses in leadership positions, as Chief Nursing Officers and on boards, who are able to exercise greater influence in shaping policy and service delivery. Nurse-led clinics, particularly for non-communicable diseases, nurse-based primary and community care, nurse specialists, nurse practitioners and nurses in public health are all playing a vital role in countries where they have been developed and employed.

The campaign went online when the Covid-19 pandemic struck in 2020. This played an important global role in linking nurses together, enabling them to discuss the

difficult issues they were dealing with, share ideas and support each other. Partnerships have blossomed and there is a greater sense of global solidarity. While the achievement of the goals of some Nursing Now groups was disrupted by the pandemic, the pandemic has demonstrated the value of nursing and the importance of future development and investment.

The combination of global, national and local action has created a social movement with energy, momentum and enormous reach. It has been immeasurably helped by social media and digital technology, bringing people together, creating digital communities and enabling anyone anywhere to spread ideas and innovation and start their own campaign for local and global improvements in nursing. It has also brought nurses together, sometimes for the first time, built confidence and strengthened links with partners and allies outside of nursing.

# Agents of Change - influence and actions

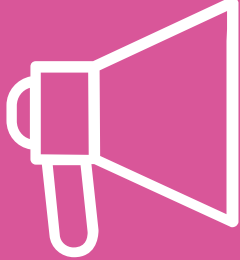
**729**  
Nursing Now  
groups

**126**  
countries



**Advocacy**

- ✓ CNO at the WHO
- ✓ 2020 Year of the Nurse and the Midwife
- ✓ *State of the World's Nursing 2020*



**Influencing policy:**

- Universal Health Coverage
- Gender
- Leadership
- NCDs
- Primary care



Taking a stand for nursing ✓ World Health Assembly  
✓ UN General Assembly ✓ Ministers of Health



Reports published:

- Triple Impact on Nursing*, 2016
- WISH report on Nursing, 2018
- Gender & leadership*, 2019
- Agents of Change*, 2021



Nursing Now mentioned in:

- 101** published papers
- 212** newspaper articles
- 157** website articles




**806** employers in **79** countries provided development opportunities for **31,498** nurses and midwives



Nursing Now group successfully lobbies for **1,400 new nurses** in Thailand. Other countries achieve staff increases.



In **24 countries**, groups say Nursing Now campaign contributed to increased investment in nursing. Pakistan pledges \$171m and scholarships for nursing.



**Innovation in health care.** Country examples include improving access to care for stroke patients in Ghana through a new telehealth rehabilitation platform.



Care for mothers and newborns improved in Uganda as a result of Nightingale Challenge leadership training for nurses and midwives.



Shaping the future of nursing with the Strategic Directions on Nursing and Midwifery.

World leaders, including the Pope, welcome 2020 as the Year of the Nurse and the Midwife, January.

*Investing in the Power of Nurse Leadership* report by Intrahealth, Nursing Now and J&J published at Women Deliver Conference in Vancouver, June.

World leaders, including the Pope, welcome 2020 as the Year of the Nurse and the Midwife, January.

129 groups in 126 countries and over 30,000 Nightingale Challenge participants by end 2020.

Agreement on transfer of groups to ICN and Nightingale Challenge is renamed the Nursing Now Challenge.

Nurses Together, season of advocacy February - April.

**2019**

**2020**

**2021**

Nightingale Challenge launched at the ICN Congress, June.

449 Nursing Now groups in 110 countries by the end of 2019.

WHO *State of the World's Nursing* report in partnership with ICN and Nursing Now published April.

Nursing Now campaign reaches a global audience through an online programme of conferences and webinars.

Global Footprints, end of campaign conference, May.

*Agents of Change*, Nursing Now final report with recommendations for further action, May.



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# Building the future

**Nursing Now was conceived as a three-year campaign designed to make a step change, and build the energy and momentum for future change, in the perceptions, status and profile of nursing.**

Sustainable long-term change in nursing will take a generation or more, as hierarchies are broken down, attitudes towards women change and a new and more holistic understanding of health takes hold in the population. Nurses will be at the forefront of all these changes – demonstrating by their actions and their values how health and society can be improved in the future.

The Nursing Now story is not just one story, but many individual and collective stories, linked together locally, nationally and globally. Developments in different parts of the world will be different and take place on different timescales. But the campaign has created a new global solidarity, allowing greater interchange of partnerships, ideas and mutual support. And many Nursing Now groups, with their ability to bring together diverse organisations – nursing and non-nursing – for a common purpose, will continue to operate into the future.

The Burdett Trust for Nursing has agreed to support the Nightingale Challenge, renamed as the ‘Nursing Now Challenge’, for another two years and to plan for its future thereafter. The challenge has developed a remarkable network of young professionals who can work together to influence the future.

Both the WHO and the ICN have played vital roles in the campaign and they have significant roles in continuing to develop nursing.

The WHO has published the new *Strategic Directions for Nursing and Midwifery*,<sup>1</sup> which follows on from the publication of the *State of the World's Nursing* report,<sup>2</sup> and will determine its strategy for the next decade. It has also launched the ‘International Year of Health and Care Workers 2021’.<sup>3</sup> Meanwhile the ICN is building links with many of the Nursing Now groups, to maintain the momentum, energy and impact of the campaign.

The Covid-19 pandemic has dominated our world for the past year and will influence its shape for the future. It has made the work that nurses do – from work in the community to the most intensive of care – visible to the wider public, and there is some evidence that nurses have become more respected and valued<sup>4</sup>. It has also revealed the dangerous and difficult situations in which so many nurses work and demonstrated beyond doubt how important their role is to us all.

This report describes the Nursing Now campaign. It is not an evaluation. That will have to come later when the true impact of the campaign can be assessed and when some of the young nurses who have participated in the Nightingale Challenge have become local, national and global leaders.

*Agents of Change* does, however, demonstrate, how nurses and their allies have created an extraordinarily powerful platform from which to improve health and develop nursing. It can offer enormous hope for us all for the future.

1 World Health Organization (2021) *Strategic Directions for Nursing and Midwifery*, Geneva: World Health Organization.

2 World Health Organization (2020) *State of the World's Nursing 2020*, Geneva: World Health Organization, <https://www.who.int/publications/i/item/9789240003279>

3 World Health Organization (2021) ‘Year of Health and Care Workers 2021’, <https://www.who.int/campaigns/annual-theme/year-of-health-and-care-workers-2021>

4 See for example <https://dailynurse.com/frontline-providers-during-the-covid-19-pandemic-respect-and-admiration/>

# Recommendations

## – keeping up the momentum

**The Nursing Now campaign has generated tremendous energy from nurses and their allies. They have truly come together as agents of change. It is critical at this pivotal moment, as the world turns its attention to rebuilding health systems for the future, that nurses do not lose this momentum.**

It is also vital to use the raised awareness, created by the Covid-19 pandemic, of what the world owes to health workers in general, and nurses in particular, to make the changes that nurses have long been arguing for: improved employment conditions, better regulation, strengthened education and research, and far greater investment in developing the profession.

This report sets out a specific set of key actions for five groups that have a fundamental role to play in the future in improving global health. No health system can function without a wholly enabled health

workforce. As the largest group of health professionals, with the greatest reach in society and the highest level of population trust, nurses and midwives offer a resource that can deliver the sustainable development agenda. However, this will only be so if decisive action is taken now to realise this potential and by those sectors whose priority it is to achieve improvements in population health, health equity, social inclusion, planetary health, gender equality and economic growth. For nursing and nurses, it can no longer be 'business as usual' but nursing included in all policies.



WISH/Bradshaw



## Nurses and midwives are urged to:

- Be confident and creative agents of change – equipped with the ability to frame and position health issues in the wider context of politics, national priorities and demographics, to provide data-driven solutions and to engage with leaders, political authorities and allies outside the nursing and midwifery professions.
- Work with each other, breaking down divisions between the different professional specialities and organisations, to create a common perspective and shared voice for advancing the professions and improving health.
- Use data to lobby politicians and policy makers for the investment that is needed to develop the nursing profession, based on the recommendations of the WHO's Strategic Directions for Nursing, and Midwifery including decent working conditions, a fair salary, lifelong learning opportunities, a career path and adequate staffing ratios.

## Employers should:

- Recognise the key role that nurses can play in designing and delivering services for their patients and the public and create the opportunities for them to do so through inclusion in policy formulation and representation.
- Ensure nurses are part of their board and all senior management entities that plan and manage services.
- Provide decent working conditions, education and support as necessary, adhering to the International Labour Organization's conventions on decent work and implementing the WHO's Strategic Directions for Nursing and Midwifery.
- Sign up to the Care Compact, proposed as an action by the International Year of Health and Care Workers 2021. The Care Compact will protect health workers' rights, decent work and practice environments.

## Education bodies need to:

- Develop their curricula to recognise the full extent of nurses' roles in health care, disease prevention and health creation.
- Adopt a model which recognises that education is informative (about knowledge and skills), formative (about professional traits and behaviours) and transformative (about leadership and influence) and develop transformative leadership skills in upcoming generations of nurses so they can be agents of change for the improvement of health and health care.<sup>1</sup>
- Promote nursing as a subject embedded in science, technology, engineering and mathematics (STEM), recognising that it is a science-based profession that solves complex health issues with individuals, families and communities.

1 Frenk J, Chen L, Bhutta ZA, Cohen J, Crisp N, Evans T, et al *Health professionals for a new century: transforming education to strengthen health systems in an interdependent world*. Lancet. 2010 <https://pubmed.ncbi.nlm.nih.gov/21112623/>



## Governments and international bodies need to:

- Commit to implementing the recommendations in the WHO's Strategic Directions for Nursing and Midwifery.
- Recognise the key role that nurses can play in both designing and delivering services for their population and create the opportunities for nurse-led services, particularly for non-communicable diseases and in primary and community care, specialist nurses, nurse practitioners and nurses in public health.
- Ensure that there is a Chief Nursing Officer and that nurse leaders are part of all policy formulation, planning and management boards within the system and that they are enabled to bring their perspective and experience to play in decision making.
- Provide the investment and the environment that will enable nurses to play these roles to the full, ensuring good working environments and conditions, appropriate education and regulation, and adequate funding for education and employment.
- Work towards gender equality at all levels of the health system, ensuring that all nurses have opportunities for promotion, equal pay for equal work and freedom from harassment at work.
- Sign up to and be accountable for implementing the proposed Care Compact with the WHO, which will protect health workers' rights, decent work and practice environments.

## The WHO and the ICN are urged to:

- Continue the momentum that has been built through the Nursing Now campaign by supporting the Nursing Now groups that have been established with learning activities and opportunities for sharing good practice and disseminating research.
- Support competency-based leadership development through existing and new initiatives, especially for Chief Nursing Officers and young nurses.
- Engage member states and Chief Nursing Officers in formulating a Care Compact to ensure decent work for nurses, including a fair salary and good working conditions.
- Gather and analyse data to prepare State of the World's Nursing reports at regular intervals to monitor global trends and ensure that more nurses are recruited, educated and retained to work in decent jobs.

# Chapter 1

## The story of the Nursing Now campaign

**This is the story of a three-year global campaign (originally scheduled to run from 2018 to 2020) that focused on improving health by raising the status and profile of nurses. It also created an informal but mighty network of nurses and their allies who have, over the three years, one of them featuring a pandemic, shared innovations, research, successes and challenges. Young nurses have stepped up to join the network as well as experienced nurse leaders. In the history of nursing there has never been such a unifying global campaign. Social media played a significant role in sharing information and linking people and has provided the mechanism for nurses to convene at national, regional and global levels. This has been the first social movement in nursing.**

In three years, the Nursing Now campaign reached 126 countries and had a social media following in the tens of thousands. While the planned activities of the campaign were interrupted by the Covid-19 pandemic, the attention of the world has been focused on health workers as never before. Nurses became highly visible in 2020: they, and their health worker colleagues, were hailed as heroes in most countries as the public became aware of the essential role nurses play in providing health care.

While the pandemic was an appalling and unexpected development, it has strengthened the case for raising the status and profile of nurses, which was the goal of the Nursing Now campaign, and it has provided a strong platform to showcase the ways in which nurses meet the challenges of providing health care in many settings and in changing circumstances. Nurses have proved to be both innovative and resilient.

In 2020, the first ever *State of the World's Nursing* (SOWN) report from the World Health Organization (WHO) showed the urgency of recruiting and retaining nurses in the workforce if serious shortages are to be avoided by 2030, and universal health coverage achieved.<sup>1</sup> The recommendations in SOWN are being taken forward as a five-year plan for WHO, as strategic directions for nursing, and will be debated at the World

Health Assembly in May 2021. Nursing is centre stage, with an opportunity for nurses everywhere to make a case for increased investment in the profession. This is a moment for change in the status and profile of nurses that is unlikely to come again for a generation.

Because of the disruption caused by the pandemic, the Nursing Now campaign was extended from the end of 2020 to the end of May 2021, and so it is shortly coming to an end, but its legacy is a strong global network of nurses and their allies who better understand the 'triple impact' of nursing: that strengthening nursing will improve health, promote gender equality and support economic growth.<sup>2</sup> This report describes how the campaign started, how it grew globally, the reach and influence it has had and what it has left behind. It also makes recommendations for nurses, their employers, professional associations, governments, the WHO and the International Council of Nurses (ICN) to continue the push to improve health by investing in nursing.

This is not, in the strict research sense, an evaluation of the Nursing Now campaign because the campaign grew in ways that were not predicted and therefore there was no framework for collecting baseline and result data. Instead, a systems approach has been taken, where a rich developing picture is described with noteworthy changes that have been observed.

<sup>1</sup> World Health Organization (2020) *State of the World's Nursing 2020*, Geneva: World Health Organization, <https://www.who.int/publications/i/item/9789240003279>

<sup>2</sup> All-Party Parliamentary Group on Global Health (2016) *Triple Impact: How developing nursing will improve health, promote gender equality and support economic growth*, London: APPG on Global Health, <http://www.appg-globalhealth.org.uk/reports/4556656050>

The context for the Nursing Now campaign changed significantly over the three-year period from 2018 to 2020, with the Covid-19 pandemic challenging health systems everywhere and bringing the role of all health workers into the spotlight. It is next to impossible to quantify the impact of the pandemic on the campaign and again a descriptive and observational approach is taken to attempt to account for the effects the pandemic had.

The campaign set out to improve health by raising the status and profile of nurses. The true impact of the campaign will only become apparent in the future when, for example, some of the young nurses involved in the Nursing Now 'Nightingale Challenge' are leaders of health services and the profession (see Chapter 2 for more information on the Nightingale Challenge). What can be observed now, though, are many changes in countries and increased investment in nursing in some of them as nursing work has become more visible and its value articulated through the Nursing Now group advocacy efforts.

## 1.1 How the Nursing Now campaign began

***"I think there's something about the timing as ever ... catching the right time."***

Dame Chris Beasley, Member of the Burdett Trust for Nursing board

***"I thought this is one of the best opportunities that I've ever seen for nurses, this is not an opportunity that we can miss, this is an opportunity that we've been given."***

ICN President, Annette Kennedy

In 2016, the All-Party Parliamentary Group (APPG) on Global Health, chaired by Lord Nigel Crisp, published the *Triple Impact* report.<sup>3</sup> It was to be the catalyst for the foundation of the global Nursing Now campaign, which was launched in 2018.

The report, fully titled *Triple Impact: How developing nursing will improve health, promote gender equality and support economic growth*,<sup>4</sup> recommended that there should be high-level commitment from the WHO, as well as governments worldwide, to increase investment in nursing. The APPG found clear evidence that investing in nursing could contribute substantially to meeting the goals of universal health coverage (UHC) and that it would also improve health, gender equality



and economic growth – hence the triple impact on the Sustainable Development Goals (SDG). It recommended that investment should be made to educate and employ more nurses and that nurses should be enabled to work to their full potential, supported by legal and regulatory frameworks.

The *Triple Impact* report landed at an opportune moment, when there was a global focus on the health workforce: the WHO's *Global Strategy on Human Resources for Health: Workforce 2030* had been unanimously adopted by the World Health Assembly in May 2016.<sup>5</sup> Data compiled for the Global Strategy identified the nursing workforce as the largest occupational group in the global health workforce. The High-Level Commission on Health Employment and Economic Growth, published in September 2016<sup>6</sup>, found evidence that targeted investment in the health workforce promotes economic growth and positively impacts broader economic and social development, including decent work, education, inclusive economic growth, health and women's economic empowerment.

The *Triple Impact* report recommended that the UK government works with the Commonwealth Secretariat, the European Union, the WHO and other international

3 All-Party Parliamentary Group on Global Health (2016) *Triple Impact: How developing nursing will improve health, promote gender equality and support economic growth*, London: APPG on Global Health, <http://www.appg-globalhealth.org.uk/reports/4556656050>

4 Ibid.

5 World Health Organization (2016) *Global Strategy on Human Resources for Health: Workforce 2030*, Geneva: World Health Organization, [https://www.who.int/hrh/resources/global\\_strategy\\_workforce2030\\_14\\_print.pdf?ua=1](https://www.who.int/hrh/resources/global_strategy_workforce2030_14_print.pdf?ua=1)

6 High-Level Commission on Health Employment and Economic Growth; Working for Health and Growth. WHO Geneva. September 2016 <https://www.who.int/hrh/com-heeg/en/>

agencies to take forward a 'major initiative' to raise the profile of nursing and make it central to health policy. The 'major initiative' became the Nursing Now campaign.

***"The work [APPG's Triple Impact report] that we [did initially], captured people's interest [... and imagination]. It went from a technical document, and evidence document into an agenda, and agenda setting process ... It was the right evidence at the right time, aligned with some of the global messages ... And we had the Burdett Trust [for Nursing] and other organisations as well, in global health, all commit to actually doing something. So I think that was a particular moment that we should capture in the history books."***

Jim Campbell, WHO, interview, 2021

## 1.2 Phase 1: Origins and preparation

### Box 1.1: Outline of the Nursing Now campaign envisaged at the initial meeting of interested parties, March 2017

- Three-year campaign
- Make reference to 'great nurses of history'
- Messages of key principles around co-development, importance of public health, emphasis on high-quality training and development (professional and certified)
- Senior and influential roles required
- Articulate need for more research, particularly economic, policy and implementation
- Need for investment in and dissemination of practical nursing research, i.e. patient outcomes
- Possibly establish key centres of leadership for research

***"This is a vision-led campaign, not a plan-led campaign. And that's why it's been successful ... the vision has been consistent and the vision is about health. It's not [just a] nursing campaign but it's a health campaign as well."***

Lord Nigel Crisp, interview, 2021

Lord Nigel Crisp and Baroness Mary Watkins led discussions regarding the creation of an independent global campaign, convening an initial meeting with the Commonwealth Nurses and Midwives and a number of stakeholders in the UK, including Health Education England and the Burdett Trust for Nursing, and started

discussions with the WHO and the ICN. The outline of the Nursing Now campaign (see Box 1.1) emerged from this first meeting.

The WHO organised a second two-day meeting with an international group in Geneva in April 2017. This meeting concluded with a unanimous resolve to move forward with an international campaign. A steering group was formed in April 2017 with membership that included representatives of the ICN, the Commonwealth Nurses and Midwives Federation, the National League for Nursing and the WHO.

The meeting also asked Lord Crisp to write to the three shortlisted candidates for the post of Director-General (DG) of the WHO to request them to appoint a Chief Nursing Officer accountable to the Director-General. All three candidates wrote back agreeing to do so.

There were three further important meetings that contributed to the planning: a meeting at the African Platform for Human Resources in Kampala in April 2017, when support from several African groups was secured; a number of meetings with stakeholders at the WHO in May 2017; and a presentation and discussion led by Lord Crisp and the then ICN Chief Executive Officer (CEO), Frances Hughes, at the ICN Congress in Barcelona in June 2017.

But there were challenges too:

***"There was some opposition to the idea of a campaign, partly because the group was not democratically elected, partly because it was UK led and partly because 'campaigns had been tried before'."***

Nigel Crisp

These three issues were ultimately addressed through a series of discussions that resulted in three strategic decisions, fundamental to the development of the campaign. The campaign would:

1. Seek to secure the WHO and the ICN, the two appropriate elected bodies, as formal partners in the campaign, providing it with legitimacy.
2. Set up the board with wide representation from 16 countries and limiting the extent of UK representation. This did mean that not everyone who had been involved from the beginning was able to be part of the constituency. There was also subsequent agreement that the campaign board should be two-thirds nurses and one third non-nurses; two-thirds women and one third men; and have two young nurses as members. They would be required to have a good knowledge of and networks in their

region and, if from a nursing background, extensive knowledge of nursing, a commitment to and passion for the aims of Nursing Now and the ability to be an effective ambassador for the campaign within their region. Representatives from the WHO and the ICN were also recruited to the board and the Burdett Trust for Nursing had two board members.

3. Concentrate on the impact of nursing on health, rather than on nursing policy issues. The territory of earlier campaigns was avoided along with matters that were being tackled by other bodies. This is also when the campaign adopted the principle of 'waste no will', engaging everyone who was moving in the same direction.

Considerable seminal work was carried out by the steering group, who met for a two-day retreat in London in July 2017. In that retreat, an initial work plan was presented and proposals were made to appoint a campaign board and to secure funding.

A meeting was held in spring 2017 between Lord Nigel Crisp, Frances Hughes (CEO of the ICN) and Dr Tedros Adhanom Ghebreyesus (the newly elected Director-General of the WHO), to follow up the request for the appointment of a Chief Nursing Officer at the WHO. They proposed that the Chief Nursing Officer should report directly to the Director-General. Previous senior nursing posts had been part of the Health Workforce Directorate, reporting to a director. The Director-General also agreed to three vital strategic goals for the campaign:

1. Nursing Now should be run in association with the ICN and the WHO (the first time the WHO had ever entered into such an agreement).
2. The year 2020 should be designated The Year of the Nurse.
3. The WHO would publish the first ever *State of the World's Nursing* report in 2020.

Throughout the campaign, the WHO and the ICN have been staunch partners, with Dr Tedros personally engaged and particularly strong support from James Campbell (Director of the Health Workforce Department at the WHO) and later Elizabeth Iro, when she was appointed Chief Nursing Officer in October 2017. The ICN President, Annette Kennedy, elected in June 2017, Thomas Kearns (the interim ICN CEO), Howard Catton (subsequently appointed ICN CEO in February 2019) and several board members of the ICN have been excellent allies.

A further important step forward was the appointment of Professor Sheila Tlou, a former Health Minister of Botswana and nursing professor, to be Co-Chair of the campaign with Lord Nigel Crisp. She brought immense experience and vital skills to the campaign. The Co-Chairs were also fortunate to have Baroness Mary Watkins as Alternate Chair, bringing her own experience and skills as a former nursing academic and specialist in mental health to bear.

## 1.3 Nursing Now goals, values and principles

During 2017, as plans for the campaign were set in motion, guiding principles to work by, objectives to focus on and strategies to bring about change were being articulated in the campaign documents.

Nursing Now was always envisaged as a global campaign, which would, in the words of the steering group: *'engage and listen to nurses and their organisations, understanding that all parts of the world can learn from each other in a spirit of co-development and mutual learning'* (Steering Committee Paper 5)<sup>7</sup>.

The name *Nursing Now* emerged from several suggestions – and initially had an exclamation mark, which was later dropped.

Governed by a set of five values and principles, listed below, the goal of the Nursing Now campaign was to improve health by raising the status and profile of nurses worldwide – influencing policy makers and supporting nurses themselves to lead, learn and build a global movement.

- Everybody has the right to health and health care.
- Everyone has something to teach and everyone has something to learn. People from different countries working and learning together can develop new approaches to improving health, which benefit us all.
- A 'Health in All Policies' approach – considering the health implications of decisions made across sectors – is vital. Factors as diverse as education, economic status, social capital and the physical environment profoundly affect the health and well-being of individuals and populations.
- Health improvement relies on people working well together. Health workers and members of the public alike should bring their different skills and

7 In Nursing Now Archives at <https://www.btfn.org.uk/>



experiences to their shared goals. Nursing should be developed with respect to the advancement of the health workforce at large and the creation of new models of care and health promotion.

- The campaign's success depends on what happens locally.

## 1.4 The role of the Burdett Trust for Nursing

The Burdett Trust for Nursing (BTFN) is a UK-based charity, established in 2002 with the aim of making charitable grants to support the nursing contribution to health care. The voluntary trustees are drawn from the worlds of health care and financing. Lord Nigel Crisp and Baroness Mary Watkins arranged to meet with the Chair of the BTFN board, Alan Gibbs, to request seed funding for the Nursing Now campaign and help with governance arrangements, which until this point had been informal. The BTFN was convinced by the vision of the campaign and the efforts of the steering group and agreed not only to give funding to the campaign, but also to house it as a project of the BTFN to be managed by the Chief Executive of the BTFN, Shirley Baines. Ms Baines played a leading role in the campaign and was a Nursing Now board member.

The Burdett Trust for Nursing's initial funding was sufficient to employ a project manager and an office manager, and to support a campaign launch and

experienced communications consultants. This initial funding from BTFN was critical to the start of Nursing Now.

Dr Catherine Hannaway was appointed in June 2017 to manage the launch of the campaign and became the Acting Executive Director until July 2018. Her contribution was vital in these early stages and she subsequently led the Nightingale Challenge initiative in Northern Ireland.

***"It became clear that there was some important messages in that [Triple Impact] report, and though the government was interested in it for the UK, we couldn't persuade them to take a real international focus. So together we wrote a bid to the Burdett Trust which was successful and I believe that without the Burdett Trust we probably wouldn't have got off the ground."***

Baroness Mary Watkins, interview, 2021

Once the initial funding from the BTFN was in place, the Royal College of Nursing provided free office space, and the KPMG provided a Clinical Fellow. The steering group continued to volunteer their time, networks and influence to help recruit campaign board members from all six WHO regions. Everything was now ready for the launch of the Nursing Now campaign.

Other major funding was secured later from the ICN, Health Education England, BUPA, NHS England, Institute for Health Care Improvement and GSK.



*Her Royal Highness Princess Muna Al-Hussein of Jordan, a champion of the campaign*

## 1.5 Planning the launch

With funding and governance in place, and a project manager and a small staff, the campaign took on a stronger identity and a launch was planned for February 2018.

What is striking about the early months is that there was only a loose governance structure for the work. Rather, it was driven by the personal motivation of the carefully chosen steering group and then the project manager and the campaign board. Importantly, and as a key lesson in getting a campaign underway, personal networks were used to find supporters for the campaign, as well as ensuring that the campaign

objectives were aligned with other stakeholder objectives – in this case the WHO and the ICN. There was an early and enthusiastic ‘buy-in’ to the idea of a campaign.

## 1.6 First campaign board meeting

In January 2018, the first Nursing Now campaign board meeting was held at Cumberland Lodge, Windsor Great Park. The focus of the first meeting was to agree the purpose and organisation of the campaign as well as to agree an initial programme of work and discuss future funding requirements.

The campaign board were also delighted to secure Her Royal Highness (HRH) The Duchess of Cambridge as Royal Patron, after discussions lasting several months.

## 1.7 The campaign launch

On the 27th of February 2018, the Nursing Now campaign was launched in the presence of HRH The Duchess of Cambridge. The launch was an interactive global event, having a central focus in London, but with simultaneous launches in Uganda, Geneva and the United States. Three speaker sessions were streamed live, the first and last in London and the second in Geneva (see Box 1.3). Launch activities also took place in Jamaica, the United States, Jordan and South Africa.

Board members and partners participated, with Dr Tedros Adhanom Ghebreyesus (Director-General of the WHO) speaking, and Elizabeth Iro (Chief Nursing Officer at the WHO), Annette Kennedy (President of the ICN) and Diana Atwine (Permanent Secretary, Ministry of Health Uganda) all in attendance at the London event.

### Box 1.2: The themes of the initial programme of work

- 1. Universal Health Coverage (UHC):** the first aim of this area of work was to influence high-level policy makers through direct advocacy to further the objectives of Nursing Now. A second aim was to encourage key partners and supporters of Nursing Now to champion progress on UHC and to help deliver UHC at ground level.
- 2. Evidence and research:** the campaign was committed to the sharing of research and evidence so that by the end of 2020, there would be ongoing robust evidence available to policy and decision makers on the impact of nursing and where it can have most effect.
- 3. Leadership and development:** this area of work aimed to promote the influence of nursing globally, within countries and organisations, ensuring that there would be senior nurses in leadership positions to influence policy, and support the development of nurses to be able to take on these roles successfully.
- 4. Sharing good practice:** this area of work had an overarching theme of further developing the role of nurses in contributing to achieving UHC and other global health goals, by strengthening nurse leadership, better disseminating evidence and sharing examples of nursing as a route to women’s empowerment and economic growth at a local level.



*Nursing Now global launch in London. From left to right: Lord Nigel Crisp, Baroness Mary Watkins, HRH The Duchess of Cambridge, Elizabeth Iro, Annette Kennedy and Diana Atwine*

### Box 1.3: Nursing Now global campaign launch event speakers

#### Strengthening Nursing across the Globe: 'What the Nursing Now campaign means in different parts of the world'

- **Lord Nigel Crisp**, Co-Chair of the Nursing Now campaign board
- **Dr Catherine Hannaway**, Acting Executive Director, Nursing Now
- **Harriett Baldwin MP**, Minister of State for Africa at the Foreign & Commonwealth Office and Minister of State for International Development, UK
- **Rosemarie Josey**, past President, Nurses Association of the Commonwealth of The Bahamas
- **Catherine Odeke**, Chief Nurse and Commissioner of Nursing and Midwives, Uganda
- **Dr Kanjana Chunthai**, Director, Government Chief Nursing and Midwifery Officer, Thailand
- **Dr Barbara Stillwell**, IntraHealth International Chapel Hill, with the Department of Nursing at University of North Carolina, United States.
- **Professor Thomas Kearns**, interim CEO, International Council of Nurses
- **Dr Tedros Adhanom Ghebreyesus**, Director-General, World Health Organization.

#### Nursing Now: Perspectives from Geneva

- **Her Royal Highness Princess Muna Al-Hussein**, Princess of Jordan
- **Professor Sheila Tlou**, Co-Chair, Nursing Now (Chair)
- **Mr Bertrand Levrat**, Director-General, Geneva University Hospitals, Switzerland

#### Translating Nursing Now into Global Action

- **Baroness Mary Watkins**, Alternate Chair, Nursing Now (Chair)
- **Elizabeth Iro**, Chief Nursing Officer, World Health Organization
- **Annette Kennedy**, President, International Council of Nurses
- **Dr Diana Atwine**, Permanent Secretary, Department of Health, Uganda

## 1.8 Phase 2: The coalescing phase

A permanent Executive Director, Dr Barbara Stilwell, was appointed in July 2018 and the campaign became established in the Royal College of Nursing's offices with a small team. A campaign strategy was accepted by the campaign board in November 2018. The overall aim of the campaign was unchanged – to improve health by raising the status and profile of nurses worldwide, by influencing policy makers and by supporting nurses themselves to lead. Five aims were agreed by the board, each with measurable outcomes, to be achieved by the end of 2020. These were:

- 1. On investment:** There is greater investment in the nursing workforce – in education and professional development, standards and regulation, and employment conditions, as well as in the numbers in training and employment.
- 2. On policy:** The health workforce generally, and nursing and midwifery specifically, are more central to global and national health policies.
- 3. On leadership and influence:** There are more nurses in leadership positions where they are able to influence policy and decision making and more opportunities for leadership and development for nurses at all levels.
- 4. On evidence:** There is more evidence available to policy and decision makers in forms that are understandable about: i) the impact of nursing and where it can have most effect; ii) the barriers that currently prevent nurses from practising to their full potential; and iii) the practical methods for addressing these barriers. And there is more research underway.

- 5. On effective practice:** There is more dissemination and sharing of effective and innovative practice in nursing and improved methods for doing so.

These campaign goals were built on the early work of the steering group and the board, reflecting the cohesion of both professional and organisational goals as the campaign developed. The board has remained influential throughout the life of the campaign, as have other people and organisations mentioned in this chapter, who were fundamental to the development of the early days of the campaign.

Nursing Now is an unusual story in nursing because it is about a campaign conceived and led by a British Lord, Nigel Crisp, who was so convinced that strengthening nursing was the key to improving health globally that he convinced colleagues from many sectors to support a campaign focused on nurses. Lord Crisp is the former head of the English National Health Service and UK Department of Health and so he has extensive experience in health systems and health workforce development. His far-reaching influence resulted in the Nursing Now campaign being launched by HRH The Duchess of Cambridge and in many champions from inside and outside nursing, and indeed the wider the health sector, who are named supporters of the campaign. Lord Crisp has remained influential throughout the campaign as Chair of the campaign board and a regular speaker at Nursing Now events. His high-profile presence and high-level networks undoubtedly get access for the campaign team to people and places that might otherwise be hard to reach and this is one reason for the rapid success of the campaign. Lord Crisp has been an important catalyst for this new story of nursing.

# Chapter 2

## The growth of the Nursing Now campaign

**This chapter describes the key activities of the Nursing Now campaign, which was vision led from the beginning, and its initial growth was shaped by demand. It grew in response to requests from nurses around the world and it remained entrepreneurial rather than bureaucratic. As a movement it learnt from what was successful and built on that. The campaign has many stories to tell – from organisations, groups and individuals around the world – about its activities, and they cannot all be told here, but the big picture is painted of the first social movement in nursing.**

Nursing Now has all the hallmarks of a social movement, in that a social movement shares a collective identity and supporters are linked as an informal network; social movements are both organised yet informal social entities that are engaged in bringing about a change either in policy or in culture. The campaign was supported by nurses and their allies around the world, all of whom were linked by the conviction that global health would benefit if nursing were to have a higher status and profile. Social media made it possible for individuals and Nursing Now groups to communicate globally, even during the Covid-19 pandemic, and the result has been the creation of a strong platform for change.

### 2.1 Nursing Now groups – bringing nurses together

This was the first *global* social movement in nursing. While there have been other international campaigns, they have been led by established organisations, such as the International Council of Nurses (ICN), so were more formal and structured; other social movements have also been national rather than global.<sup>1</sup> The Nursing Now campaign played out in the rapid formation of Nursing Now groups around the world. Messages from the campaign were shared on social media but the campaign did not mandate the formation of groups nor prescribe their structure, size or activities, nor did it offer any funding. Nevertheless, the Nursing Now groups burgeoned and became

essential contact points for the campaign, forming an ever-growing communications network.

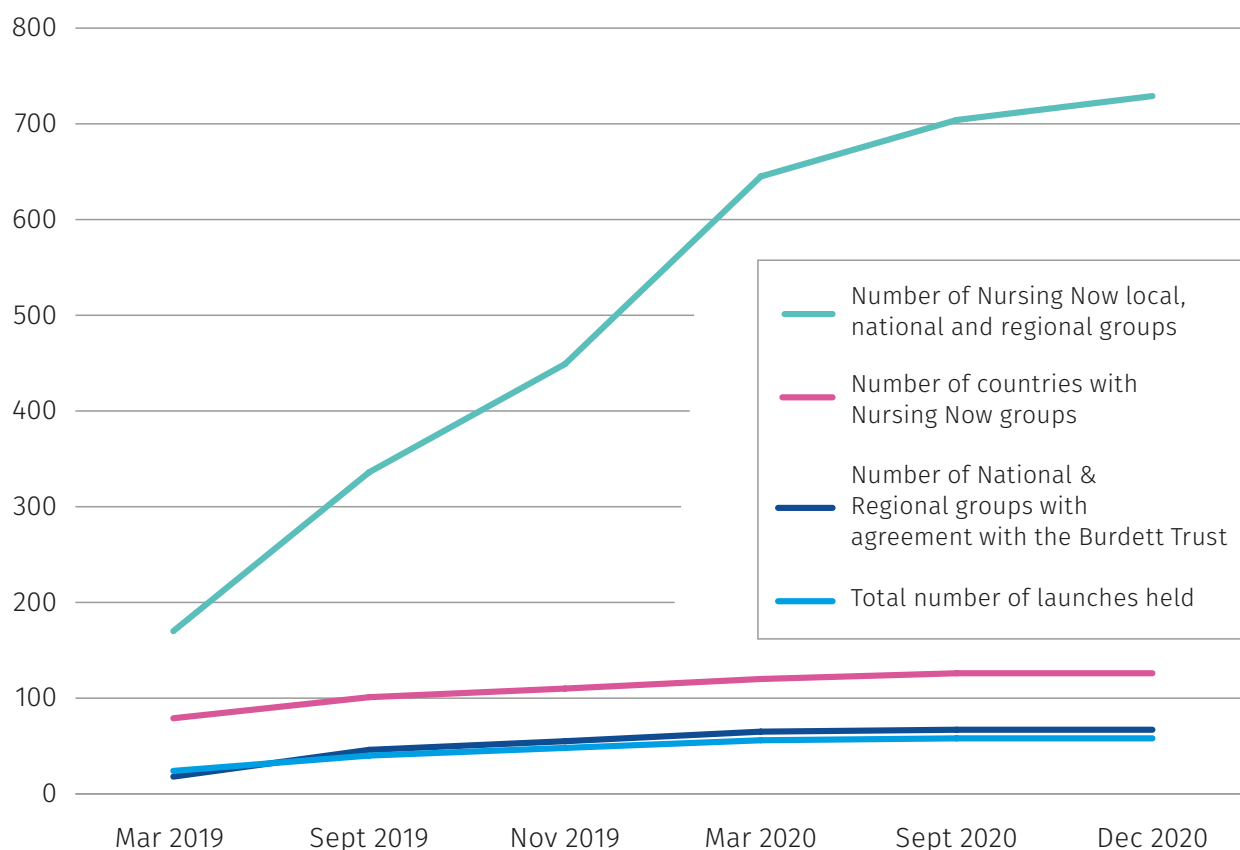
All groups intending to register with the campaign were asked to support the vision and aims of Nursing Now and to agree to the group guidelines prior to registering. National and regional groups were required to invite their ICN-affiliated national nursing association (if there was one in the country), the most senior nurse at government level, young nurses and a representative of the country/regional World Health Organization (WHO) office. This guidance was an important unifying framework for groups, ensuring that they had the appropriate stakeholders on board and were registering to be recognised as the right category of group. On completion of registration, every group received a 'resource mailer' from the Nursing Now stakeholder coordinator, highlighting resources available on the Nursing Now website.

There could only be one national group in a country, but any number of more local groups based on locations and institutions – from city groups to those associated with a nursing college or an employer.

A database of groups was established, and a stakeholder manager was appointed to communicate with groups and track their activities. A year after its launch, the campaign had registered more than 100 groups. Figure 2.1 shows the growth in the number of groups until December 2020.

<sup>1</sup> Campaign for Action (2016) 'Nursing movement looks to past to change the future', 1 April, <https://campaignforaction.org/nursing-movement-looks-past-change-future>

**Figure 2.1: Nursing Now groups' growth by group type (March 2019 – December 2020)**



Once the stakeholder coordinator was satisfied that a national/regional group had met the requirements, they facilitated the signing of the Burdett Licence Agreement by a senior figure within the Nursing Now group and the Chief Executive of the Burdett Trust for Nursing. Both parties and Nursing Now retained copies of these agreements. The fully signed agreement legitimised the national/regional groups' status and, as permitted, their use of the 'Nursing Now' trademark. Local groups were not required to fulfil any additional criteria post-registration.

Groups were invited to share their goals for the campaign and to report on progress every three months. These accounts have been shared widely between groups and through social media and some of them form the case studies described in this report. The reach, scale and level of engagement of local, national and regional Nursing Now groups have been a key factor in the growth of Nursing Now as a global campaign. The ambitious launches and active network

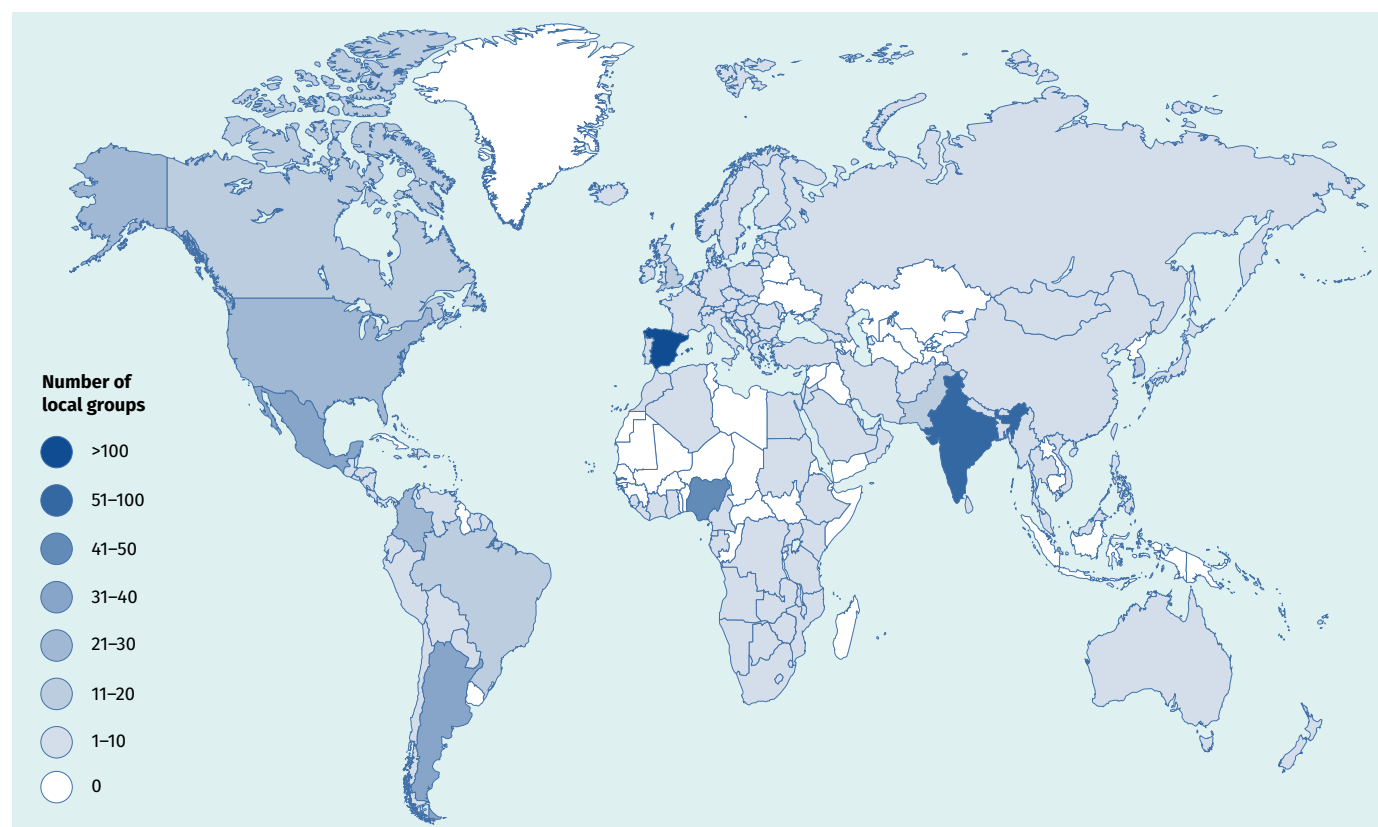
of groups contributed to increased attention on nursing across the globe, working to influence national and global policy and garnering local support.

***"I think the groups really have been major players in this, they've been very involved and they've had no money from us. Everything they've done has been voluntary and yet they've done wonderful things around the world, so I think the groups have been instrumental – because of their enthusiasm and energy – ... in making this movement work."***

Barbara Stilwell, Executive Director, Nursing Now, interview, 2021

Figure 2.2 shows the extensive global reach of the campaign, pointing to a presence, in terms of registered group numbers, across all WHO member states and a particularly strong presence in specific countries, with Spain having the greatest number of groups (n=106) and quite a strong group presence in India (n=81), Nigeria (n=47) and Mexico (n=40).

**Figure 2.2: Density of Nursing Now local groups in December 2020**



### 2.1.1 The significance of group launches

As Nursing Now groups launched across the globe, so the campaign became more widely recognised. Launches were frequently reported across organisations, networks and social media. Nursing Now board members, the ICN and the WHO provided support in attending the launch events. The national group launches provided a visible convening platform for the nursing community to speak about the contribution that nursing makes to delivering high-quality health care.

***“The biggest change I have seen is that nurse leaders from many organisations around the country are coming together and they’re planning on how nursing can actually create a greater impact.”***

Maureen Bisognano, Institute for Healthcare Improvement and campaign board member, interview, 2021

Board members, the campaign Chairs and Alternate, campaign partners ICN and the WHO and the campaign Executive Director all travelled extensively to attend launches and other notable events in 2018 and 2019. The arrival in a country of Nursing Now board members, especially the Co-Chairs and Alternate Chair,

plus the Chief Nursing Officer for the WHO and the ICN President, were notable and prestigious visits for nurses, especially in those countries that might not have had a reason to invite the dignitaries of nursing other than launching the Nursing Now groups. It was a way to raise the profile of nurses in countries where that might not previously have been possible.

The Nursing Now secretariat was frequently asked to supply invitation letters from the board Chair for Ministers of Health to attend a launch. As far as possible, no will was wasted and the campaign secretariat and board sought to support local efforts. The majority of national groups launched with Ministers of Health, key government officials, nursing associations, often WHO presence, young nurses and other key stakeholders. This diverse gathering exposed policy makers to a new narrative about nursing, offering an opportunity for them to verbalise their support. The presence of high-level influential leaders, coming together to support the Nursing Now groups, brought national and global attention to the issues that were being raised about nursing.

***“In many areas, it brought together quite diverse groups of nurses, who often have different ideas, some from government departments, some from unions, some from local organisations, to come together and say, look, in this area, can we work together to get our voice heard both at a national level, but also at a local level. You know better together than apart.”***

Dame Chris Beasley, Burdett Trust for Nursing, board member interview, 2021

***“Well, I think Nursing Now has given greater impetus even though there were previously some people who were advocating this and not much visibility was there. Once Nursing Now came into the picture, the role that nurses could play in multiple areas, from advanced clinical care, to primary care, to rehabilitation and palliation, to research, all of these became quite emphasised and I think that brought much greater visibility.”***

Professor Srinath Reddy, Public Health Foundation for India, board member interview, 2021

It is a challenge to single out exemplars of launches from among the hundreds that have taken place in the last three years. Below we describe three launches that illustrate what could be achieved through these events in different ways and how significant they could be for nurses at country level.

### **2.1.2 Launch in Brazil – powerful actors**

The launch of Nursing Now Brazil, in April 2019, brought together powerful actors in a large ceremony where nurses were recognised. The following day, many of these internationally known nurses travelled to a school of nursing to speak to students there and launch a school of nursing local group.

The professional association for nurses in Brazil, along with the Nursing Now board member, had mobilised the Nursing Now global campaign partners and so this garnered publicity in the country and the Minister of Health also attended. It turned out that the sister of that Minister of Health was a nurse and perhaps that connection too had facilitated his attendance. However it came about, this launch was attended by the following people:

- Minister of Health of Brazil
- Chief Nursing Officer, World Health Organization (WHO)
- Director of the Pan American Health Organization (PAHO) and Regional Director for the Americas of the World Health Organization (WHO)

- Regional Advisor on Nursing and Allied Health Personnel/Health Systems and Services/Pan American Health Organization (PAHO/WHO)
- President, International Council of Nurses (ICN)
- Executive Director, Nursing Now Global Campaign.

***“And I remember the launch of the campaign, which was attended by political and governmental authorities as well as representatives of the Minister of Health, who are able to praise and recognise the importance of nursing to improve the health of the population, especially for its role in primary care.”***

Claudia Laselva, Brazil, Nursing Now board member, interview, 2021

### **2.1.3 Launch in the Republic of Korea: the biggest launch – getting nurses noticed**

The largest group launch during the campaign was held by South Korea on November 2nd 2018. More than 5,000 nurses gathered in Seoul to launch Nursing Now Republic of Korea, in a ceremony that inspired supporters across the world. Hosted by the Korean Nurses Association, the launch was attended by President of the Korean College of Nurses as well as by the President of the ICN, who took to the stage to talk about the campaign and thank the Korean nurses for their passionate involvement.

***“We knew it was going to be a big launch... they were really smart, many politicians were given the opportunity to say something ... with 5,000 nurses in a stadium... it was phenomenal ... I've seen nothing like it ... for a launch ... the credit goes to the Korean Nurses Association ... they were the ones who pulled that off...”***

Howard Catton, CEO ICN, Nursing Now board member, interview, 2021

### **2.1.4 Launch in Kenya – political impact**

One example of what could be achieved by a highly visible launch event comes from Kenya. Nursing Now Kenya was officially launched in 2018 by Kenya's First Lady, Margaret Kenyatta, in Nairobi.

There were events held across the day, including a procession through the streets of Nairobi, an official ceremony held at the Kenyatta International Conference Centre and an exhibition showcasing the work of nurses and trainee nurses from hospitals and universities around the country.

Speaking during the launch, the First Lady said that she would focus on this nursing campaign to encourage local action to support health workers at community level.



***“I have seen the hard work of nurses during my visits to health centres and seen midwives work under difficult conditions providing antenatal clinics by ensuring safe delivery and help mothers get the necessary medical resources. The campaign is timely as we seek to improve quality of care and access to health through our commitment to Universal Health Coverage.”***

First Lady of Kenya, 2018

The Health Cabinet Secretary attended the launch, which was hosted in coordination with the Ministry of Health, the Nursing Council of Kenya, the United Nations Populations Fund and the WHO. Dr Catherine Hannaway, Acting Executive Director of the Nursing Now campaign at the time, also spoke at the launch.

Alfred Obengo, who organised Nursing Now Kenya, urged the Ministry of Health to address issues including shortages of nurses and midwives in all 47 counties in Kenya, and the need to support nurses in leadership roles by providing them more opportunities to expand their practice. *“To empower nurses and midwives we need timely promotions and the allocation of more resources for capacity building and training.”* Obengo stressed that the launch confirmed the government’s aim of achieving universal health coverage in Kenya.

## 2.2 Creating opportunities for early-career nurses

From its inception, the Nursing Now campaign had

two early-career nurses on its board and a focus on developing leadership skills in young nurses. Social media is popular among younger people and so Nursing Now’s use of social media attracted many young nurses to participate in the campaign. National groups were requested to include younger nurses in their activities.

The participation of young nurses was seen as critical to the campaign because they – and the nurses coming after them – are the key players in the future nursing workforce. The first initiative targeted at young nurses was a workshop in Geneva around the World Health Assembly, and the second was the much larger-scaled ‘Nightingale Challenge’.

### 2.2.1 Pre-World Health Assembly, May 2019, young nurses event

In May 2019, Nursing Now and its partners – the ICN, the WHO, the World Innovation Summit for Health (WISH), Qatar Foundation and Sigma Theta Tau – welcomed 23 young nurses aged under 35 to Geneva to participate in a two-day workshop prior to the annual World Health Assembly.

The learning opportunities in this programme were designed to develop participants’ skills to:

- articulate the value of global health standards to national health care
- discuss the impact on nursing practice of international standards, policies and guidelines



- explain what influential leadership is and how it could change nursing culture
- apply learning to their own practice situation and give evidence of this through preparing and presenting a final assignment.

The Nursing Now team brought these young people together as part of a campaign drive to expose nurses and midwives early in their career to the processes that underpin global health policy development. They gathered from all over the world to meet senior leaders in global health care, including WHO Director-General, Tedros Adhanom Ghebreyesus, and WHO Chief Nursing Officer, Elizabeth Iro.

The learning style was experiential, focused on getting the participants to develop their own solutions to issues as far-ranging as finding their way around Geneva, to finding their national delegations in the Assembly. The participants helped each other, establishing a WhatsApp group on the first day to communicate. None of the group was left out and it was impressive to see the ways in which they supported each other in small practical matters and in the coursework. The same WhatsApp group functions today, two years later.

A second pre-World Health Assembly workshop was planned for 2020 but, because of the Covid-19 pandemic, it could not be held. The group of young nurses who were selected have been invited to participate online in workshops with Elizabeth Iro, Howard Catton and Lord Crisp to address the WHO *Strategic Directions for Nursing and Midwifery* and consider their own advocacy

activities. They have also joined the WhatsApp group of young nurses formed in 2019.

In 2021, two of our cohort of young nurses participated in an international press conference with Dr Tedros to address the need for vaccines for health workers in low-income countries. This was an important moment for Nursing Now: nurses, and especially young nurses, are not usually asked to participate in these international press conferences.

## 2.3 The Nightingale Challenge: from the ward to the boardroom

***“It was all really about encouraging employers to really focus on young nurses and midwives and give them leadership development opportunities, because they are the future, they’re full of energy. When you look at the State of the World’s Nursing report and actually harnessing the power and potential of that huge early-career nursing and midwifery workforce ... it was such an amazing opportunity and I [had to embrace it really and go on the journey].”***

Professor Lisa Bayliss-Pratt, Coventry University, interview 2021

In June 2018, the Nursing Now campaign board first discussed the idea of a ‘call to action’ for 1,000 employers of health workers across the world to support 20 of their early-career nurses by providing leadership development programmes as part of the Florence Nightingale 2020 celebrations. The idea was rooted in the goals of the Nursing Now campaign to see more opportunities for development for young nurses and ultimately more nurses in leadership positions.

In early 2019, campaign board members agreed to launch the ‘Nightingale Challenge’, which would ask employers of nurses and midwives worldwide to provide a development opportunity for at least 20 young nurses and midwives in 2020, with the aim of having at least 20,000 people on a development programme over the course of the year.

The employers would design a development programme that could be any mix of formal courses, mentoring, shadowing or learning from other professionals or services, with the employer determining the content and format to ensure that the programme was relevant to the national and organisational context, as well as the needs of the population they serve. The only requirement was that employers include some personal development and the opportunity to learn about leadership and the wider policy context of health care. Initial discussions among the Nursing Now board members also addressed the

importance of facilitating the creation of networks between the young nurses and midwives to support mutual learning and enable them to have a voice regionally and globally.

It was agreed that the Nightingale Challenge should seek to demonstrate that nursing and midwifery are exciting professions and spark a global movement in which employers commit to supporting the leadership development of their early-career nurses and midwives, based on the understanding that effective and improved health care is delivered by multidisciplinary teams and that nurses and midwives must play an increasingly influential role in these teams.

### 2.3.1 Driving global engagement in the Nightingale Challenge: the influence of the Nursing Now board and campaign network

During the months of preparation, prior to the launch event, the Nursing Now board identified Chief Nursing Officers as key stakeholders for the success of the Nightingale Challenge.

As a participating member of the Nursing Now board, Elizabeth Iro, the WHO's Chief Nursing Officer, took part in early discussions about the challenge and quickly offered her support in promoting this initiative, and featured in the Nightingale Challenge promotional film. She stressed the importance of ensuring alignment between the challenge and the policy dialogue discussions around the *State of the World's Nursing* report<sup>2</sup> and participated in several Nightingale Challenge and *State of the World's Nursing* themed webinars over the course of 2019 and 2020. These proved to be extremely popular among Nursing Now groups and Nightingale Challenge employers, gathering hundreds of participants at each webinar.

From the outset, the Nursing Now board played a central role in establishing connections with employers and ensuring global engagement. Board members were instrumental in securing participation from 'early adopters'. These organisations were the first to accept the Nightingale Challenge prior to the launch in June 2019 and served to demonstrate global interest and engagement and promote uptake from other employers worldwide.

The existing Nursing Now global network also played an important role in establishing the Nightingale Challenge. In early June 2019, Nightingale Challenge Programme Director, Professor Lisa-Bayliss Pratt, and

### Facilities engaging early in the Nightingale Challenge

- Guy's & St Thomas' NHS Foundation Trust, UK
- Hospital Israelita Albert Einstein, São Paulo, Brazil
- Specialty Hospital, Amman, Jordan
- Queensland Health, Queensland Australia
- South Eastern Sydney Local Health District, Australia
- Mulago National Referral Hospital, Kampala, Uganda

Nursing Now Co-Chair, Lord Nigel Crisp, visited India to participate in meetings with Nursing Now Champion, Sangita Reddy, President of the Federation of Indian Chambers of Commerce and Managing Director, Apollo Hospitals. These meetings focused on the implementation of the Nightingale Challenge across the chain of Apollo Hospitals. This was a significant moment that led to over 50% of the Apollo Hospitals accepting the challenge.

Sangita Reddy was instrumental in supporting, connecting and championing the Nightingale Challenge to influential decision makers in Delhi and across the country.

***"Nurses have always been the protagonists of medicine and its care continuum. In 2020 it is prudent that we invest further to empower and prepare them for their new role in making Universal Health Coverage a reality for all."***

Sangita Reddy, President of the Federation of Indian Chambers of Commerce and Managing Director, Apollo Hospitals, India

### 2.3.2 Nightingale Challenge: the launch

The Nightingale Challenge was officially launched at the ICN Congress in Singapore in June 2019. In the presence of the world's national nursing associations, both Lord Nigel Crisp and Professor Sheila Tlou, Nursing Now's Co-Chairs, introduced the Nightingale Challenge to the world. This moment provided a significant opportunity to raise the profile of the challenge on the global stage, putting the spotlight on the potential of young nurses and midwives, and the importance of providing them with leadership skills early in their career.

2 World Health Organization (2020) *State of the World's Nursing 2020*, Geneva: World Health Organization, <https://www.who.int/publications/i/item/9789240003279>

***“The Nightingale Challenge is an opportunity for all participating organisations to be part of a great global movement to develop nursing and midwifery. ... By accepting the Nightingale Challenge, you are demonstrating your commitment to investing and championing nursing and midwifery at a time when the two professions will be enjoying global attention through the Year of the Nurse and the Midwife.”***

Lord Nigel Crisp, Co-Chair of the Nursing Now campaign at the launch

***“It is essential that nurses are enabled to play a bigger role in multidisciplinary teams, working to their full potential to innovate, to lead and to advocate. We hear, time and again, that nurses are being held back as leaders. We need to seize the opportunity that 2020 gives us to shape a different future for our profession by investing in the next generation. By accepting the Nightingale Challenge we give them new skills, experiences and confidence – together we will take down the barriers that hold nurses back and see our profession soar to greater heights.”***

Annette Kennedy, President of the ICN

### **2.3.3 Global uptake of the Nightingale Challenge, 2019–21**

In addition to the six early adopters listed above, more than 50 organisations accepted the Nightingale Challenge on the official launch day, the 28th of June 2019. Employers quickly began signing up to the programme and by late December 2019 there were almost 500 employers and more than 20,000 nurses and midwives taking part in Nightingale Challenge training programmes globally. Despite the interruption of the Covid-19 pandemic, the Nightingale Challenge networks were sustained and continue to this day. To date, there are more than 31,000 young nurses signed up to the programme through almost 800 employers.

As with other aspects of the campaign, there were no prescribed programmes, though links to materials were made available on the Nursing Now website and eventually partnerships were facilitated between hospitals with the Nightingale Challenge Partnerships Platform (NCP), which was launched in October 2020. This provided the opportunity for the development of collaborative relationships between participating Nightingale Challenge organisations as well as other health employers. Employers from every region chose to be a part of this platform and benefit from the experiences of colleagues worldwide. Partners were found locally, regionally or globally with the support of the Nightingale Challenge. To date, the Nightingale Challenge has facilitated partnerships between more than 90 organisations, resulting in 48 partnerships, with some organisations choosing to work with multiple partners.

In June 2020, Nursing Now organised a virtual global conference to mark the one-year anniversary of the launch of the Nightingale Challenge. This event brought together 67 speakers from across 21 countries to participate in 17 sessions. More than 2,570 people registered for the event and a total of 1,022 attended on the day. The opening session included a special video message from Dr Tedros Adhanom Ghebreyesus, WHO's Director-General, and a live address from Nursing Now Ambassador and actor Emilia Clarke.

***“Investing in young nurses is going to be a game changer in every country, and I have to say in Australia we were the first to put our hand up for the Nightingale Challenge.”***

Jill White, Nursing Now campaign board member

### **2.3.4 Early adopters**

The engagement of the ‘early adopters’ and the participation of the highly respected chain of Apollo Hospitals created a pool of elite employers who were seen globally to be supporting their nursing and midwifery staff, and honouring them as part of the 2020 celebrations. They acted as a catalyst, demonstrating that by participating in the Nightingale Challenge, organisations could enhance their reputation nationally and internationally – as both good employers and ones that shared Nursing Now's global vision of universal and improved health care, by investing in young nursing and midwifery leadership.

The WHO region of South East Asia quickly positioned itself as a frontrunner in Nightingale Challenge sign-ups, with India representing more than a third of participating nurses and midwives, closely followed by the UK.

In order to nurture the enthusiasm for the Nightingale Challenge in India and the UK, Nursing Now launched Nightingale Challenge Facebook groups for registered employers, to facilitate ongoing communication and exchange. While these groups were successful in allowing participating employers to share updates and upcoming events, they did not create the level of interaction expected, suggesting that in order to create meaningful exchange and partnerships among Nightingale Challenge organisations, a more direct and managed approach would be required.

Employers in high- and middle-income countries were expected to fund their own programmes. However, where programmes could not be funded locally, Nursing Now offered to help find support for organisations. In spite of this, very few funding applications were made.



*Dr Tedros Adhanom Ghebreyesus Director General, WHO talking with young nurses Geneva 2019*

### 2.3.5 Recruitment at regional level: the mobilisation of leading actors and networks

Although the Nightingale Challenge was met with enthusiasm and success on a global scale, regional disparities became evident, with slow growth across Europe, and countries in West and Central Africa notably absent from the list of Nightingale Challenge participating countries.

In order to promote uptake of the Nightingale Challenge across the WHO regions, a series of regional events was organised in early 2020. One of these meetings took place in Kampala, Uganda from the 3rd to the 4th of February 2020, and provided the opportunity for Nursing Now board members, along with a delegation of influential regional health care leaders and key organisations (including Aga Khan University, Jhpiego, ECSACON and WHO AFRO) to discuss the progress and future of the Nursing Now campaign. This was also an opportunity for Nightingale Challenge Programme Director, Lisa Bayliss-Pratt, to give an update on the status of the Nightingale Challenge and where Beatrice Amuge of Mulago Hospital Uganda and a young nurse leader from Malawi, Joe Nkhonjera, shared their experiences of the challenge.

***“I was able to meet with nurse leader, Beatrice Amuge, who talked to me about the tangible change that she is witnessing as a result of the Nightingale Challenge. I was delighted to hear that she had not only embraced the development of the Mulago Nightingale Challenge programme for her young nurses; but that she also***

***felt that as a result of being directly engaged with the young nurses at the hospital and realising the potential they had, she was challenged to change her perceptions and the way she practises nursing.”***

Professor Bayliss-Pratt, Nightingale Challenge Programme Director

***“I have accepted the Nightingale Challenge 2020. Why? Because it is going to raise up the profile of the young nurses ... It is going to give them the knowledge and the skills, the passion, and be able to lead and to advocate and to lobby for the resources for the services and for the profession and most especially for the work of the nursing care given to patients.”***

Beatrice Amuge, Nurse Leader, Mulago Hospital, Kampala

Nursing Now was invited to attend the inaugural meeting of the Pacific Heads of Nursing from the 11th to the 13th of February 2020. Nurses from Australia, Fiji, French Polynesia, Nauru, New Zealand, Palau, Solomon Islands, Tonga and Tuvalu participated in this meeting, where Nursing Now's 2020 activities, including the Nightingale Challenge, were presented. Following this meeting there was a significant increase in the number of countries from the region accepting the Nightingale Challenge.

In addition to Nightingale Challenge regional webinars, which highlighted the activity of participating organisations and provided the opportunity for best practice sharing, these in-person meetings proved key to the success in driving the regional recruitment of employers to the Nightingale Challenge.



### 2.3.6 Creating networks for the Nightingale Challenge: virtual learning, social media and leadership

Following the launch of the Nightingale Challenge, Nursing Now's communications focused on raising the profile of the initiative and supporting the recruitment of employers.

Nursing Now's digital engagement saw a period of rapid growth following the launch of the challenge, with more than 20,000 new users interacting with the Nursing Now website from the 1st of June to the 22nd of August 2019 and a total of 85,000 page views. Among the most visited content was the Nightingale Challenge microsite that provided guidance on accepting the challenge, an interactive map, resources, film and an online acceptance form, as well as materials and resources translated into six languages. Weekly recruitment numbers, country updates and news from Nightingale Challenge programmes were shared on social media to encourage uptake. The focus was also on creating content and opportunities to share the experience of employers and participants.

In order to encourage organisations to accept the Nightingale Challenge and create an active network of employers, nurses and midwives, Nursing Now implemented a robust agenda of events that included regular webinars and opportunities to learn more about the Nightingale Challenge and connect with participating organisations through social media

events, webinars, case studies and blogs. These activities provided valuable opportunities for organisations to gain a deeper understanding of the Nightingale Challenge and learn from the experiences of others. It not only facilitated a global discussion on how to implement leadership development training for early-career nurses but also supported the development of a global network of organisations, each working towards the same goal.

### 2.4 Making evidence available: webinars, publications, collaborations

As the Nursing Now campaign became widely known, the staff and the board members were invited to contribute articles, chapters and opinion pieces to journals, and to speak at launches and conferences. While often asked to talk about the campaign, they were also asked to talk about recent developments in nursing or indeed heard about them during conferences. During the three years of the scheduled campaign, a vibrant programme of webinars has shared up-to-date information on nursing and engaged nurses around the world in policy discussions with senior members of the WHO, the ICN, the International Labour Organization (ILO), regional, national and local nursing associations and several non-governmental organisations, including the World Innovation Summit for Health of the Qatar Foundation, IntraHealth International, JHPIEGO and Chemonics.

Nursing Now webinars were essential to the campaign during 2020 when face-to-face meetings became impossible because of the Covid-19 pandemic. It was also the Year of the Nurse and the Midwife, and the *State of the World's Nursing* report, published in April.<sup>3</sup> It was a remarkable year for nursing and the campaign aimed to reflect its significance by providing expert-led sessions on thought-provoking themes. Topics have included data analysis, gender and leadership in nursing, decent work for nurses, compassion and stress management, mentoring, advocacy, careers advice, the *State of the World's Nursing* report and lessons learnt from the Covid-19 response. Attendance at the webinars has been consistently high and the campaign has benefited from many high-profile speakers, attracted to the webinars because of the global penetration of Nursing Now and, for the same reason, many organisations have requested collaboration with the campaign to host webinars.

#### 2.4.1 Collaborations and research

Though not a technical programme, the campaign has collaborated with others on two major reports, both of which addressed core elements of the campaign: nursing and universal health care (UHC) and gender issues in nursing.

The first, published at the World Innovation Summit for Health conference in November 2018, was the report of the World Innovation Summit for Health's Nursing and UHC Forum.<sup>4</sup> The report was authored by Lord Nigel Crisp, Co-Chair of the Nursing Now campaign board, Sharon Brownie, who was Dean of the School of Nursing and Midwifery, The Aga Khan University, East Africa, and Charlotte Refsum, who was the KPMG Fellow made available to support the campaign. The report made evidence-based recommendations that have resonated, and been reiterated, throughout the campaign, the core of which was to redesign existing and introduce new and innovative services that maximise the contribution made by nurses and midwives, enabling them to work at the top of their licence. The launch of this report at the World Innovation Summit for Health conference attracted much attention and has formed the basis for several subsequent conference papers.

The second piece of research addressed gender issues in nurse leadership, and was done with IntraHealth International and funded through them by Johnson & Johnson. The research was designed as a rapid gender assessment and analysis, and took place between September 2018 and March 2019. More than 3,000 responses were received and revealed some of the common barriers that female nurses face in being successful leaders. The report,<sup>5</sup> *Investing in the Power of Nurse Leadership: What will it take?*, was launched at the Women Deliver conference in Vancouver in 2019 and has been discussed at several webinars since. It was referenced by the *State of the World's Nursing* (SOWN) report<sup>6</sup> and assumed even greater importance as the SOWN report showed that 90% of the world's nurses are women.

#### 2.4.2 Sharing ideas

The Nursing Now campaign quickly developed an advocacy toolkit in 2018, which was made available through the Nursing Now website, and updated for the Nurses Together advocacy campaign of 2021. Blogs and case studies were invited and published regularly to showcase innovation, successes and overcoming challenges. Nursing Now groups were invited to share their initiatives and, once the Nightingale Challenge was launched, the website featured the experiences of employers and young nurses.

Social media was ubiquitous throughout the campaign. Webinars and resources were advertised on Facebook and Twitter as well as through announcements on our networks.<sup>7</sup>

This chapter has described the way that the campaign grew globally, how it influenced ideas on the development of nursing and in particular how it engaged with young nurses. The Nightingale Challenge and the focus on young nurses have been catalytic in showing employers what a valuable resource young nurses are. The young nurses have been inspiring to all in their enthusiastic participation in Nursing Now and the Nightingale Challenge. They will lead change into the future.

3 World Health Organization (2020) *State of the World's Nursing 2020*, Geneva: World Health Organization, <https://www.who.int/publications/i/item/9789240003279>

4 Refsum C, Brownie S and Crisp C (2018) *Nursing and Midwifery: The key to the rapid and cost-effective expansion of high-quality universal health coverage*, Doha, Qatar: World Innovation Summit for Health.

5 Newman C, Stilwell B, Rick S and Peterson K (2019) *Investing in the Power of Nurse Leadership: What will it take?*, Chapel Hill, NC: IntraHealth International, <https://www.intrahealth.org/resources/investing-power-nurse-leadership-what-will-it-take>

6 World Health Organization (2020) *State of the World's Nursing 2020*, Geneva: World Health Organization, <https://www.who.int/publications/i/item/9789240003279>

7 A full assessment of the growth of social media has been carried out for this report and the results are found in Chapter 4.

# Chapter 3

## Appraising what Nursing Now has achieved

**The Nursing Now story is not just one story, but many individual and collective stories threaded together across local grass root organisations and global regions. These stories provide accounts of the formation and journey of the Nursing Now campaign, the Board, with its members and partners, and most importantly, the nurses and midwives who have made this landmark campaign possible.**

Though from the outset the Nursing Now campaign had goals and values, it was led by its stakeholders and by its shared vision of improving health care by increasing investment in nursing. The rapid growth of groups throughout the world was a welcome surprise that determined how the campaign worked, with its group networks and contacts. As the groups proliferated it became clear that there would have to be a way of coordinating their activities and communications and so the management system for

the campaign developed in response to what was happening. The Nightingale Challenge was a different development, though still vision led. It was more carefully planned and from the outset it was clear that it would require coordination mechanisms and ways to share information.

In the strategy document of 2018, the strategies, actions and outcomes of the campaign were identified as the framework for action.

**Figure 3.1: The strategies, actions and outcome of Nursing Now**



The actions were implemented through the campaign but as already pointed out, this is not one story because each group, local, national or regional, had their own goals, linked to Nursing Now but also responsive to local needs and each group had its own networks and systems. In appraising the achievements of the campaign, it has been necessary to stand back and look at the big picture, the many stories, that include the story of the Covid 19 pandemic, and the interrelated systems of stakeholders that have made up the context of the campaign. Our approach is therefore to take a descriptive approach to measuring what the campaign has achieved based on the data collected.

This report is not an impact assessment, nor does it seek to be an evaluation, but rather it gives a rich description of the contexts and activities of a three year global campaign which is anticipated to show an impact on health outcomes in the next 5-10 years because it has promoted greater investments in nursing.

The picture has been built using a multi-method approach to triangulate information to capture different perspectives. Methods include a survey, case studies, interviews, analysis of social media and a scoping review. More details are given below of how each method was developed and used.

## Ethical approval

The research protocols were submitted and approved by Nursing Studies, School of Health in Social Science, University of Edinburgh, ethics committee. All data collection was undertaken to comply with the Nursing and Midwifery Council Professional standards of practice and behaviour for nurses, midwives and nursing associates (2018)<sup>1</sup>.

## Surveys

### Nursing Now groups

An online survey was emailed out to all 729 registered Nursing Now groups through Qualtrics on the 5th October 2020. Participation was voluntary and participants were able to withdraw at any time. Participant information sheets and consent forms were integrated within the online survey. Reminders were sent to groups. Participants were also asked to submit documentary evidence of any outputs, which a number did. The survey remained open until 31st December 2020. A total of 292 responses were recorded and analysed.

### Nightingale Challenge employers

An online survey was emailed out to all 794 registered Nightingale Challenge employers through Qualtrics on the 2nd of December. Participation was voluntary and participants were able to withdraw at any time. Participant information sheets and consent forms were integrated within the online survey. Reminders were sent to groups. The survey remained open until the 31st of January 2021. A total of 200 responses were recorded and analysed.

Both surveys recorded quantitative and qualitative data. Following data cleaning, quantitative data was analysed through Qualtrics where a descriptive analysis was undertaken. Data from open ended questions were extracted, summarised into themes and in some cases re-coded.

### Interviews

Short semi-structured interviews were undertaken with the majority of Nursing Now board members between November 2020 – January 2021. These were conducted by a small team of nurse academics from Nursing Studies, School of Health in Social Science, The University of Edinburgh, and Nursing Now. Eleven interviews were undertaken with the regional board members. Each interview lasted for approximately 30-minutes, and focused on exploring the influence of nursing now in their country and WHO region, along with what they believed to be the key successes within the campaign. They were also asked to highlight any individuals that they believed to have been influential in their region through the campaign along with any recommendations going forward. Ten interviews were then undertaken with the board members from Nursing Now (Lord Nigel Crisp, Professor Sheila Tlou, Baroness Mary Watkins, Dr Barbara Stilwell) WHO, (James Campbell, Elizabeth Iro) ICN (Annette Kennedy, Howard Catton) and Burdett Trust for Nursing (Dame Christine Beasley, Shirley Baines). These latter were 15-30 minute interviews discussing how the individuals became involved with the campaign, why they believe the campaign to be a success and any key moments for them throughout the campaign. Interview data were transcribed and summarised into themes, using a thematic analyses.

### Case studies

Case studies were produced using multiple methods. Multiple case studies were produced through in-depth semi structured interviews. Other case studies were informed by reaching out to national group leads, board members or individuals who had been identified through the process of the report. These group leads

<sup>1</sup> <https://www.nmc.org.uk/standards/code/>

were asked if they wished to write their own case study or provide materials that could be used to produce a case study on their group or country's experience during the Nursing Now campaign. Finally, other smaller case studies on the success of the campaign, and especially on investments in nursing made as a result of the campaign, were put together from the extracted survey data.

### Scoping review

A scoping review was conducted by a small team from the University of Edinburgh and Stirling University. The protocol for this can be found registered on OSF<sup>2</sup>. The review was conducted in accordance with the JBI methodology for scoping reviews. It looked at three different literature sources, papers, newspapers and websites published after 1st January 2018 to 2020. The following electronic databases were searched LILACS, CINAHL, Epistemonikos, PubMed, Medline, WoS core collection, Global Index Medicus, Campbell, Cochrane, JBI, OpenGrey, Nexis and Scopus. The review identified papers that had a focus on the Nursing Now campaign and included search terms Nursing Now and/or Nightingale Challenge. Papers were included from any country and limited to those published in English. In a two-stage selection process, two independent reviewers screened and retrieved papers against inclusion criteria. Key data were extracted from the eligible papers and charted, with a narrative summary of the review findings. From the review 101 published papers, 212 newspapers and 157 website articles were identified.

### Social network analysis

A social network analysis was conducted by Dr Wasim Ahmed, Lecturer in Digital Business at the Newcastle University Business School to analyse the reach of the social network, key actors on social media and the interaction with the campaign on social media.

## Building a picture

This report brings together a detailed picture of what those who have been involved in the campaign reported that it has influenced or changed. Such changes are likely to be outputs rather than outcomes at this stage. For example, a country might report

a promise or intention to invest in nursing but that investment has yet to have an outcome – for example, more nurses trained. The impact of the investment – better health outcomes for example – might be still some way off.

The results of campaigning activities are harder to pin down than those of service delivery. Quantitative methods have been used to establish the reach and influence of the campaign through the growth and activities of groups, and the networks created through social media. Qualitative methods – interviews, scoping reviews and case studies – have been used to explore the reported factors that led to changes in the profile and status of nurses.

The arrival of a global pandemic in the final year of the campaign had several effects. It interrupted country programmes and Nightingale Challenge activities; it meant that travel was no longer possible; it threw nurses into the spotlight in ways seldom seen before and it resulted in limited media opportunities as all attention was on Covid-19. In assessing the achievements of Nursing Now it has been critical to differentiate between contribution and attribution because Covid-19 changed the context of the work of the campaign so profoundly, and in doing so changed public opinion and the perceptions of many politicians about nurses and the importance of nursing.

Most Nursing Now campaign successes have happened because all the pieces in a large puzzle have come together, sometimes in unexpected ways, especially in 2020. It is therefore impossible to attribute all changes to the campaign, but this report sets out enough evidence to show the nature of the contribution, whether influencing the media, mobilising Nursing Now groups, or building a broad coalition of employers and young nurses in the Nightingale Challenge.

Nursing Now has been an advocacy campaign and it has several indicators that point to its success as such. Research papers from the data collected by the research team are currently in progress and will be forthcoming. However, further research will be needed in 3-5 years to estimate its impact on health through its influence on nurses and policy makers.

2 The reach investment influence and legacy of the Nursing Now global campaign to raise the profile and status of nursing worldwide a scoping review protocol.pdf (Version:2) [https://osf.io/8nbq4/?view\\_only=f30006d818614e5b876573f29fc5bf39](https://osf.io/8nbq4/?view_only=f30006d818614e5b876573f29fc5bf39)

# Chapter 4

## Nurses as agents of change

In compiling this report on the Nursing Now campaign, it has become clear that the demand-led way the campaign grew meant that it became more diverse, and arguably richer, than was initially anticipated. There was also a disastrous pandemic during the campaign, which changed the context of campaign activities. There have been so many stories with so many accomplishments, that in exploring the effects of the campaign, a bigger picture has to be described than would be captured in the more detailed measures originally formulated.

### 4.1 Building a platform for change

The campaign set out to improve global health by raising the status and profile of nurses. To do this, the strategy aimed to influence policy globally and support local action. A platform was built as a springboard for change, which was founded on the networks of groups and stakeholders (local, regional and global). In this chapter the strength and functions of these networks in the campaign are described, based on data from surveys and interviews. The reach of all media, including social media, is reported, showing a powerful growth in global networks and media awareness during the campaign. The campaign strengthened its platform for change, especially in influencing nursing in policies, through its technical reports and papers, webinars and advocacy activities and these too are described in this chapter.

There have been many accounts of the ways that countries have developed and invested in nursing and these tales are told with the caveats that sometimes there has not been an opportunity for the results of the development and investment to be fully realised. Because every one of the many stories that make up the campaign is unique, case studies are shared in this chapter, offering a deeper look at the ways that groups have worked at local, national and regional levels. Nurses have shown themselves to be capable agents of change.

### 4.2 Global influence

***'NN is the only global HUB that has all related giant institution as WHO, ICN, ICM, Parliament, Politicians, private sector, Government sector, regions.'***

Sarah Walji, Young Board Member, Interview 2021

Nursing Now, the World Health Organization (WHO) and the International Council of Nurses (ICN) have been a powerful coalition that has targeted its advocacy to its major stakeholders. Three major developments agreed in 2017 by Nursing Now and the ICN with Dr Tedros Adhanom Ghebreyesus, the Director-General of the WHO, and his colleagues have shaped the whole campaign:

- the appointment of the Chief Nursing Officer at the WHO, with the job description agreed between the parties and an appointment made later that year
- the agreement to advocate for 2020 to be the Year of the Nurse, with the World Health Assembly subsequently agreeing in 2019 that 2020 should be the Year of the Nurse and the Midwife
- the agreement to publish the first ever *State of the World's Nursing* report, subsequently published in 2020.<sup>1</sup>

The campaign has collaborated with the Institute for Health Care Improvement, the World Innovation Summit for Health (WISH), Qatar Foundation, Sigma Theta Tau in the United States, the Prosperity Fund of the UK, the Wellcome Trust, Seed Global Health, Johnson & Johnson, IntraHealth International and the Consortium of Universities for Global Health. Through all of these collaborations, and with the support of its board members, Nursing Now was able to influence such initiatives as:

- lobbying G20 leaders to integrate nursing into Covid-19 recovery plans

<sup>1</sup> World Health Organization (2020) *State of the World's Nursing 2020*, Geneva: World Health Organization, <https://www.who.int/publications/i/item/9789240003279>

- presenting the Nursing Now campaign at the United Nations General Assembly, the World Innovation Summit for Health (WISH), the World Health Assembly, the IHI International Forum, the Women Deliver conference, the Astana Meeting on Primary Care, and various WHO, ICN and International Confederation of Midwives (ICM) meetings
- developing open coursework for nurses through the Institute for Healthcare Improvement
- Baroness Watkins (Alternate Chair, Nursing Now) Co-Chairing the *State of the World's Nursing 2020* report, which garnered broad global attention and influence
- developing the Nightingale Challenge to support local, regional and national advancements in nursing career development, leadership and impact
- collaborating with the WHO and ICN on 2020 the International Year of the Nurse and the Midwife in coordinating associated publicity and broad community outreach.

The publication of the *State of the World's Nursing* report in 2020 was a game changer for nursing because it makes recommendations that are evidence based and will underpin the *Strategic Directions for Nursing and Midwifery*<sup>2</sup> that member states will discuss and commit to at the 74th World Health Assembly in May 2021. This gives specificity to calls for investment in nursing – in decent work, gender equality, leadership development and opportunities throughout the nursing workforce from early career onwards and education for nurses that produces competent practitioners and researchers and continues to advanced practice levels.

Nursing Now has been invited to major global conferences to present the work of the campaign. Examples include: the Women Deliver conference, 2019; the International AIDS Conference, 2018; the Prince Mahidol conference, Thailand, 2020; the Commonwealth Nurses' Conference, 2019 and 2020; and the World Innovation Summit for Health (WISH), Qatar Foundation, 2019 and 2020. For a short campaign this shows strong global acknowledgement.

The Covid-19 pandemic meant that the campaign used virtual connections from March 2020 onwards and in many ways became even more global, offering webinars on many subjects featuring self-compassion, mental health and innovation in the face of the pandemic. The campaign featured in a virtual session at the

United Nations Commission on the Status of Women in February 2021 and has brought together young nurses to discuss and debate the WHO's strategic directions for nursing with the Chief Nursing Officer at WHO Geneva and her team.

The campaign was asked to identify two young nurses to participate in a global press conference with Dr Tedros Adhanom Ghebreyesus, the Director-General at the WHO: a young nurse from Pakistan and one from Uganda told compelling stories of their experience during the pandemic and advocated for vaccines for health workers. This was an unprecedented opportunity for young nurses to have their voices heard at the highest levels.

### 4.3 Nursing Now groups – coalitions for change

The level of engagement achieved by the Nursing Now groups has been a key factor in the reach and influence of the campaign. The active network of groups has contributed to the increased attention to nurses across the globe through their high-profile launches and by their activities, which in most cases were directed to improving national or local health challenges. Groups have linked global to local initiatives. One example is the data collection for the *State of the World's Nursing* report: Nursing Now groups engaged in providing data for the global report and again in discussing the findings.

The evidence gathered from the groups suggests that this was achieved most effectively, through the creation of coalitions, both within and outside the nursing profession. The collective identity of the groups through the shared values of the campaign, while maintaining a local distinctiveness, saw the emergence of a social movement with agency and a commitment to the campaign's goals.

#### What the Nursing Now groups survey revealed

From the 729 groups invited to participate in our survey, 40% (n=292), mainly local groups, responded. The four highest local group survey responses were from Spain (n=28), Nigeria (n=9), India (n=8) and Canada (n=7). The response rate was considered reasonable given that the survey was sent out during the Covid-19 pandemic. We know from the data reported in this survey and from many groups requesting more time to complete the survey that the impact of the pandemic was a factor affecting completion rates.

2 World Health Organization (2021) *Strategic Directions for Nursing and Midwifery, 2021-2025* Geneva: World Health Organization. <https://www.who.int/publications/m/item/global-strategic-directions-for-nursing-and-midwifery-2021-2025>

Data from 166 Nursing Now groups indicated that for more than half of them the launch of their group or of the Nightingale Challenge was their most successful event. The different types of launches are described in Chapter 2 – some were notable because of the presence of high-level national officials or outside visitors from Nursing Now, the ICN or the WHO. But they also offered a platform for different interest groups in nursing to come together around the unifying theme of improving health care by raising the status and profile of nurses. These events built relationships and created momentum for subsequent developments.

**“One of the biggest highlights [of the Nursing Now campaign] is the global collaboration of nursing communities that has actually filtered down to country and national level.”**

Elizabeth Iro, Chief Nursing Officer, WHO, interview, 2021

Figure 4.1 illustrates, by WHO region, the number of nurses and midwives that the survey response groups were representing. With Europe having the largest number of survey groups responding, it also represented the greatest number of nurses and midwives in the 10,000+, 1,001–5,000 and under 25 ranges. All regions had groups representing 10,000+ nurses, with Africa reporting the smallest number in this range, perhaps reflecting the lower numbers of nurses and midwives in this region. This demonstrates that the number of nurses and midwives reached by the Nursing Now campaign globally has been significant. The 292 groups that responded represented by themselves more than one million people.

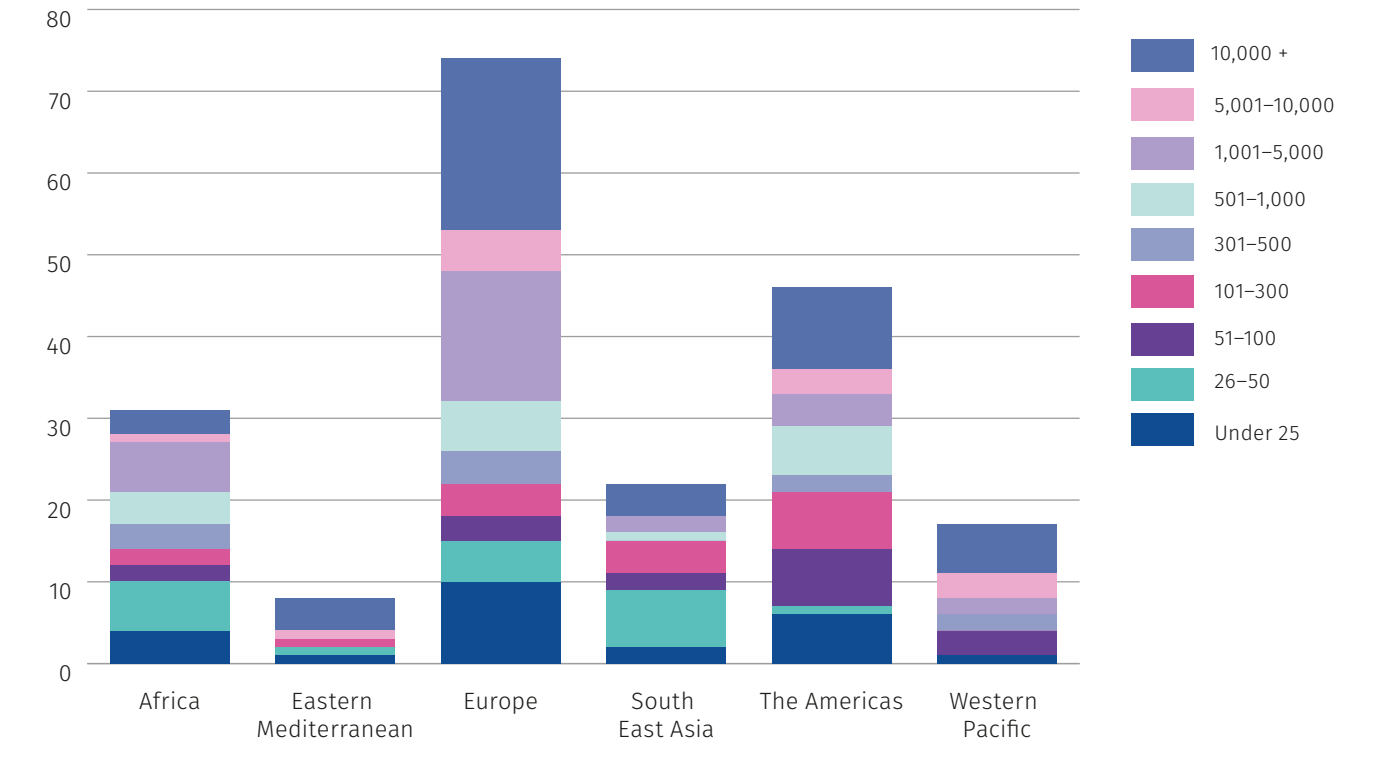
### Group networks

The survey asked Nursing Now groups to describe which stakeholders they were engaging with as part of their group activities. Table 4.1 shows the varied network of actors and institutions involved in groups. Remarkably, the survey showed that around 30% of the groups responding (88 out of 292) reported that the Ministry of Health was itself participating in the campaign and therefore advocating for improvements in nursing. The large number of universities/colleges and schools of nursing involved in the campaign may reflect the engagement of young nurses with the campaign. Early-career opportunities to be involved in advocacy and the campaign’s leadership activities have clearly been a key ingredient of the groups and are a strong message for the legacy of the campaign.

**“I think within my country and in a lot of other countries as well, particularly in the African region, one key development we have seen is particularly in engagement of young people. We find that before the Nursing Now campaign, young nurses were not very much involved with regards discussions within the profession, with regards practice within the profession, and we were seen as sort of outliers. But through the Nursing Now campaign, young nurses have been more engaged, more active and more involved within programmes that occur within the profession across the continent.”**

Munashe Nyika, young Nursing Now campaign board member, interview, 2021

**Figure 4.1: Number of groups representing nurses and midwives within each range size, by WHO region**



**Table 4.1: Institutions involved in the Nursing Now campaign**

|   | Africa | Eastern Mediterranean | Europe | South East Asia | The Americas | Western Pacific | Total      |
|---|--------|-----------------------|--------|-----------------|--------------|-----------------|------------|
| Ministry of Health  | 18     | 7                     | 25     | 9               | 19           | 10              | <b>88</b>  |
| Other national ministries   | 4      | 2                     | 10     | 1               | 9            | 2               | <b>28</b>  |
| Local (county or district) administration   | 14     | 1                     | 33     | 9               | 11           | 6               | <b>74</b>  |
| Chief nurse's office  | 17     | 6                     | 27     | 10              | 15           | 8               | <b>83</b>  |
| Service delivery nurse management   | 14     | 4                     | 21     | 7               | 14           | 6               | <b>66</b>  |
| Colleges and schools of nursing   | 19     | 7                     | 48     | 13              | 30           | 11              | <b>128</b> |
| Universities  | 12     | 5                     | 51     | 10              | 30           | 9               | <b>117</b> |
| Schools   | 8      | 1                     | 19     | 5               | 13           | 1               | <b>47</b>  |
| Professional associations   | 15     | 5                     | 42     | 11              | 23           | 11              | <b>107</b> |
| WHO national or regional office   | 7      | 3                     | 11     | 4               | 10           | 2               | <b>37</b>  |
| Non-governmental organisations (NGOs) or international non-governmental organisations (INGOs) | 12     | 3                     | 11     | 5               | 16           | 7               | <b>54</b>  |
| Patient associations  | 6      | 0                     | 19     | 1               | 4            | 2               | <b>32</b>  |
| Other   | 4      | 2                     | 12     | 2               | 5            | 2               | <b>27</b>  |

A total of 193 groups reported setting objectives for their group campaign, and engaging young nurses was the most commonly selected objective, followed by holding conferences and advocacy activities. Policy

change was the fifth most highly selected objective (see Table 4.2). Together these resonate strongly with the campaign's themes (see Box 1.2, Chapter 1).

**Table 4.2: Group objectives, by WHO region**

|  | Africa | Eastern Mediterranean | Europe | South East Asia | The Americas | Western Pacific | Total      |
|--|--------|-----------------------|--------|-----------------|--------------|-----------------|------------|
| <b>Advocacy</b>                          | 19     | 5                     | 25     | 13              | 26           | 8               | <b>96</b>  |
| <b>Fundraising</b>                       | 9      | 3                     | 3      | 3               | 6            | 1               | <b>25</b>  |
| <b>Conference</b>                        | 17     | 4                     | 38     | 9               | 22           | 7               | <b>97</b>  |
| <b>Webinar</b>                           | 12     | 2                     | 25     | 11              | 19           | 3               | <b>72</b>  |
| <b>Workshops</b>                         | 12     | 3                     | 30     | 12              | 16           | 8               | <b>81</b>  |
| <b>Research</b>                          | 12     | 4                     | 23     | 10              | 18           | 1               | <b>68</b>  |
| <b>Publications</b>                      | 11     | 2                     | 26     | 5               | 14           | 5               | <b>63</b>  |
| <b>Podcast</b>                           | 1      | 1                     | 4      | 0               | 3            | 0               | <b>9</b>   |
| <b>Policy change</b>                     | 13     | 5                     | 26     | 9               | 16           | 4               | <b>73</b>  |
| <b>Linking with international groups</b> | 13     | 4                     | 16     | 7               | 18           | 6               | <b>64</b>  |
| <b>Engaging young nurses</b>             | 20     | 6                     | 52     | 16              | 30           | 10              | <b>134</b> |
| <b>Other</b>                             | 4      | 2                     | 17     | 0               | 8            | 4               | <b>35</b>  |

Data from 152 groups showed that 132 of them were monitoring progress towards achieving their identified objectives. This was seen across local, national and regional groups. Methods of monitoring ranged from formal monitoring and evaluation plans with impact assessment, to recording the nature of activities/ events and attendance rates.

***“The monitoring was sent to the nursing advisory system, one technical officer is responsible for one health region (13 regions over the country) that consists of 4–6 provinces, in each province there is a provincial chief nurse who acts as a supervisor to monitor the events and activities.”***

National group –Thailand

## 4.4 Influencing investment in nursing

The Nursing Now campaign’s aim was to improve health globally and locally by developing nursing and investing in nurses and midwives. Investment was called for, not only to address the global shortage of nurses and midwives predicted by 2030, but also to unlock

nurses’ potential by developing their professional practice through improving working conditions, education and leadership.

This report has necessarily taken a subjective approach to assessing how the campaign has influenced investment in that it relies on reports from groups, sometimes triangulated by media reports, about what investments have taken place. It will take further research in the years ahead – maybe through the data for the next *State of the World’s Nursing* report – to ascertain whether governments have made good on all their investments and if they have had an impact on the ability of the nursing workforce to improve health.

The Nursing Now group survey asked whether there had been government investment in nursing during the campaign. Table 4.3 shows that of 150 Nursing Now groups, 63 of them (42%) confirmed government investment during the campaign period. Investments made in the Americas and Europe, where the Nursing Now groups are large and numerous, are notable.

**Table 4.3: Number of responding groups indicating government investment in nursing during the Nursing Now campaign, by WHO region (2018–2020)**

| WHO Region            | No        | Yes       | Sum        |
|-----------------------|-----------|-----------|------------|
| Africa                | 13        | 11        | 24         |
| Eastern Mediterranean | 1         | 5         | 6          |
| Europe                | 35        | 26        | 61         |
| South East Asia       | 7         | 6         | 13         |
| The Americas          | 25        | 8         | 33         |
| Western Pacific       | 6         | 7         | 13         |
| <b>Sum</b>            | <b>87</b> | <b>63</b> | <b>150</b> |

Data on whether the investment was influenced by the campaign was reported by region from a total of 62 groups. More than half of those groups reported that

the Nursing Now campaign had influenced investment, with just under a quarter not knowing if there had been any influence (see Table 4.4).

**Table 4.4: Number of responding groups indicating Nursing Now campaign influence on investment, by WHO region**

|             | Africa    | Eastern Mediterranean | Europe    | South East Asia | The Americas | Western Pacific | Sum       |
|-------------|-----------|-----------------------|-----------|-----------------|--------------|-----------------|-----------|
| Do not know | 3         | 0                     | 8         | 1               | 1            | 1               | 14        |
| No          | 0         | 0                     | 9         | 1               | 2            | 1               | 13        |
| Yes         | 7         | 5                     | 9         | 4               | 5            | 5               | 35        |
| <b>Sum</b>  | <b>10</b> | <b>5</b>              | <b>26</b> | <b>6</b>        | <b>8</b>     | <b>7</b>        | <b>62</b> |

Table 4.5 provides reported data from 46 groups about whether reported investment was in place – in other words promises had been kept. The vast majority,

27 (59%), reported that the investment was in place though 14 groups (30%) did not know and 5 (11%) reported the investment was not in place.

**Table 4.5 : Number of responding groups reporting investment in place, by WHO Region**

|             | Africa   | Eastern Mediterranean | Europe    | South East Asia | The Americas | Western Pacific | Sum       |
|-------------|----------|-----------------------|-----------|-----------------|--------------|-----------------|-----------|
| Yes         | 7        | 3                     | 7         | 4               | 2            | 4               | 27        |
| No          | 1        | 1                     | 1         | 0               | 2            | 0               | 5         |
| Do not know | 1        | 0                     | 8         | 1               | 2            | 2               | 14        |
| <b>Sum</b>  | <b>9</b> | <b>4</b>              | <b>16</b> | <b>5</b>        | <b>6</b>     | <b>6</b>        | <b>46</b> |

## 4.5 Nursing Now in the digital era<sup>3</sup>

The use of digital platforms, combined with creative content and actively engaging with followers, contributed to making a fast-growing and active online community, which supported the development of the network and furthered engagement with the campaign, especially around key moments and advocacy messages. Box 4.2 shows the number of followers of Nursing Now-owned social media accounts as of April 2021.

### Box 4.2: Followers of Nursing Now-owned social media accounts as of April 2021

**Twitter:** 27,400

**Facebook:** 42,600

Facebook groups including Nursing Now Youth 29,000 and Nightingale Challenge Global Solutions Initiative (NCGSI) 608

**Instagram:** 9,000

**YouTube:** 861

However, there were many other accounts associated with the campaign – for example, country group accounts – that had been set up across Twitter (n=47) and Facebook (a Nursing Now youth group with more than 29,000 members and 11 other Facebook pages), which also helped to maximise the social media presence of the campaign. Globally, groups reported that Facebook and Twitter were the most popular social media platforms for the campaign but there were some regional differences, for example in the use of Instagram, WeChat and Weibo.

Twitter was the ‘go-to’ platform used by Nursing Now, although Facebook remained a significant platform for many audience groups. The social media environment is fast changing so it was critical to remain agile and responsive when developing engaging content, and in choosing channels.

A social network analysis of Nursing Now’s Twitter metrics looked at users actively engaged with Nursing Now’s main account (@NursingNow2020) and the connections made over the course of the campaign. Twitter’s internal analytics show that the central Twitter account maintained excellent reach throughout the campaign. A Twitter impression occurs when a tweet shows up on a user’s timeline; for instance, if a tweet receives 100 impressions then that means the tweet would have appeared on 100 timelines. High impressions are correlated with higher engagement (retweets and likes), meaning that more people have seen and reacted to the tweet.

In 2017, tweets from @NursingNow2020 received at best 54,000 impressions. The number of impressions increased significantly from 2018 through to 2020 and, on several occasions, there were more than one million impressions received on tweets, resulting in increased visibility. The greater number of impressions also meant that more people were interacting with content by liking, commenting and sharing.

A social network analysis of Twitter identified users who were talking about the campaign since its inception and created a visualisation of a growing network of people interacting and engaging with Nursing Now and each other (see Figure 4.2).

<sup>3</sup> Ahmed W (2020) *Nursing Now Social Media Evaluation*. Newcastle University UK <https://www.ncl.ac.uk/business/people/subject-staff/marketing-operations-systems/>

### Box 4.1: Pakistan investment case study

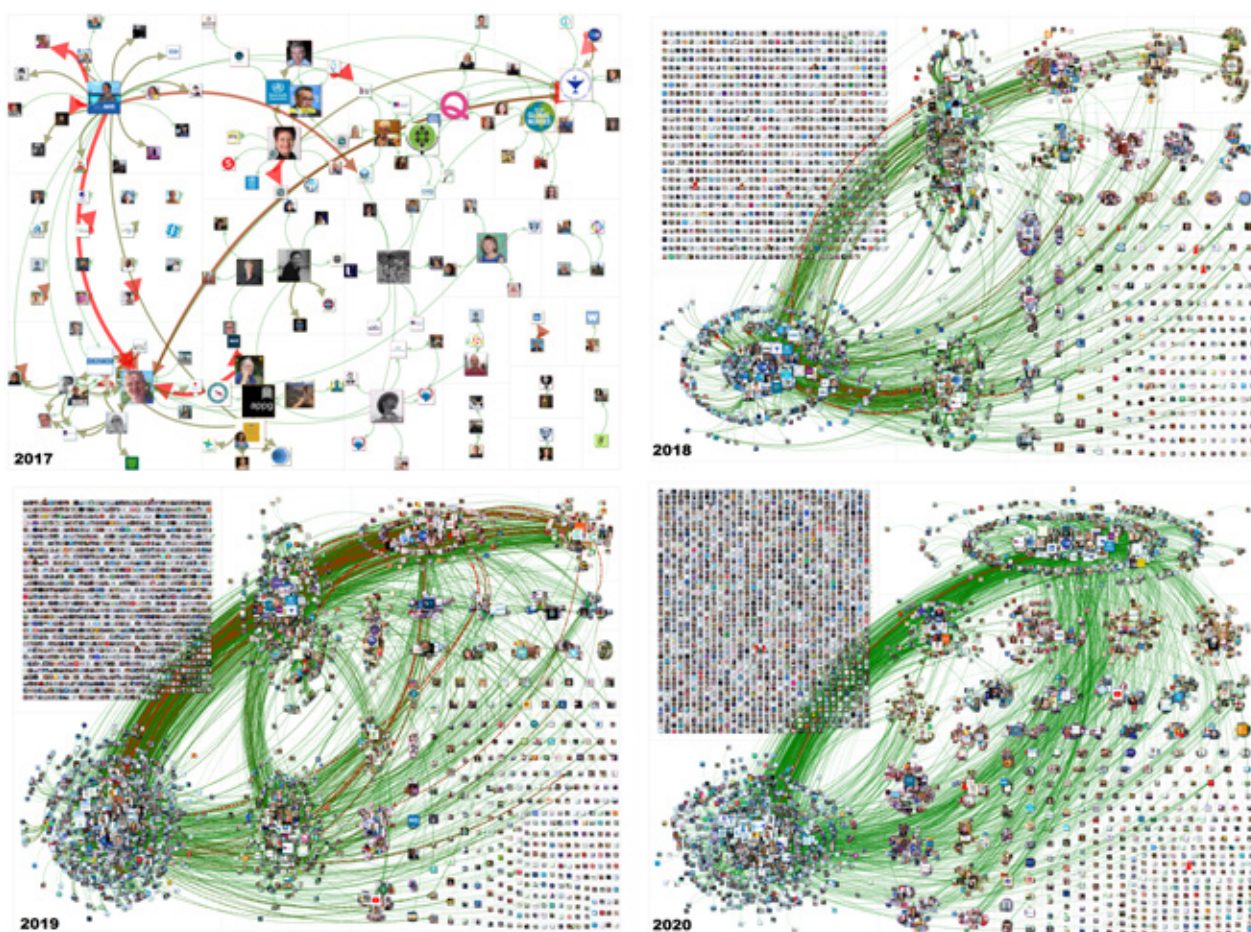
Pakistan launched its national Human Resources for Health Vision for 2030 in 2018, with the aim of addressing the health workforce skill mix and the nursing workforce. There was a timely opportunity for Pakistan to join the Nursing Now campaign against a background where there was strength in the individuals and organisations concerned with the issue; and a known shortage of one million health workers.

***“I believe it was a pivotal turning point for investment in nursing in Pakistan.”***

Catherine Hannaway, Global Health Consultant, Acting Director, Nursing Now, June 2017–July 2018

The launch of the Nursing Now Pakistan & First Nursing & Midwifery Summit on the 8th of January 2019 took place at President House, Islamabad and was hosted by Dr Arif Alvi, President of the Islamic Republic of Pakistan. In attendance were some high-level dignitaries including the Parliamentary Secretary at the Ministry of Health and the Minister of Health. Dr Catherine Hannaway travelled to Pakistan to represent Nursing Now at the launch and a video message was provided by Dr Tedros Adhanom Ghebreyesus. This was clearly a potentially influential gathering – and so it proved to be, with the following development and investments promised after the Nursing Now launch.

- development of a PC1 Project for Strengthening of the Nursing & Midwifery Profession, costing 28 billion Pakistan rupees (174,237,708 in US dollars) by the Ministry of National Health Services, Regulations & Coordination, Pakistan
- phasing out of the Diploma in Nursing and the start of the Bachelor of Science in Nursing (BSN) degree programme
- conversion of the Post Basic Specialty Diploma to a degree programme
- a free online continuing professional development (CPD) programme for nurses and midwives, with the collaboration of the World Continuing Education Alliance (WCEA) UK and the ICN.
- approval for the first ever Nursing University at Islamabad, the construction of which has started
- allocation of 1,000 scholarships for nursing degree programmes by the Ministry of Education Pakistan
- attachment of a nurse as nursing advisor to the State Minister of Health
- an increase in public and private nursing institute degree programmes
- the mandatory establishment of nursing colleges with every recognised medical college at country level
- enhancement of BSN and Master of Science in Nursing (MSN) admission seats in nursing institutes
- initiation of a PhD in Nursing at three universities
- elimination of gender discrimination and the development of male nursing institutes
- establishment of an online registration system to facilitate the nursing professional at their doorstep
- revision of curricula within nursing disciplines
- development of a curriculum for a Master and Bachelor in public health nursing degree programmes
- development of a curriculum for an ‘Infection and Prevention Control Course’ to train nurses throughout the country
- preparation and training of Intensive Care Unit (ICU) nurses for Covid-19 with the collaboration of the Health Services Academy (HSA) Islamabad
- publishing of the Pakistan Journal of Nursing & Midwifery
- awarding of the Pride of Performance Civil Award by the President of Pakistan to a nurse in recognition of her meritorious contribution towards the nursing profession.



**Figure 4.2: Network visualisation of Twitter usage, 2017–20**

Source: Ahmed W (2020) Nursing Now Social Media Evaluation. Newcastle University, UK

A comparison of the network visualisation over time shows a community taking shape, with clusters of discussion and more users joining discussion, retweeting and replying to one another.

Figure 4.2 shows that the largest groups from 2018 to 2020 were the ‘isolates’ groups. These were users who were tweeting using the #NursingNow hashtag by sending individual tweets and not replying to and/or mentioning other users. Brands often look for these types of groups within their network as it indicates a level of brand awareness.

The graph density measures the degree to which users are connected to each other and a comparison over time shows more users joining in discussions related to the campaign. The social network analysis identified a cohort of key influencers and groups with the potential to extend the reach of the campaign, providing opportunities for a more targeted social media campaign.

## 4.6 Spreading the word: articles, newspapers and websites

The scoping review<sup>4</sup>, described in Chapter 3 and soon to be available in full, identified references to the Nursing Now campaign in journal articles, newspapers and websites that were published in English. Reference to the campaign in the wider media is an important indicator of campaign visibility.

### Published journal articles

Of the 101 papers that met the inclusion criteria (one of which was that they were in English), the majority were commentaries and editorials. There were a few reviews and original research papers. Most of the papers came from the Americas, including the United States, and the next largest number came from Europe, though there were papers from all WHO regions. Thirty-three papers were published in 2018, 32 in 2019 and 36 in 2020.

4 Thomson A, Shepherd A, Holloway A, Braid N. The reach, investment, influence and legacy of the Nursing Now global campaign to raise the profile and status of nursing worldwide: a scoping review protocol. [Internet]. [cited 15 April 2021]; Available from: [https://osf.io/8nbq4/?view\\_only=f30006d818614e5b876573f29fc5bfb39](https://osf.io/8nbq4/?view_only=f30006d818614e5b876573f29fc5bfb39)

A good number of papers from 2018 and early 2019 announced the launch of the Nursing Now campaign and there were several papers in 2019 that outlined the launch of the Nightingale Challenge in relation to the larger Nursing Now campaign.

Many of the papers cited the Nursing Now campaign to add weight to a concern or argument being made, based on the goals and values of the campaign. Several papers discussed the need for improvement in some aspect of the nursing profession – for example, arguing for increasing the number of nurses, for better education for nurses and for nurses to have more influence in health care systems – to support the goals of universal health coverage. Some of these papers focused on a range of sub-themes concerned with policy, leadership, education or workforce development. These themes resonate strongly with the aims of the campaign and with the *State of the World's Nursing* report published in 2020.<sup>5</sup>

The International Year of the Nurse and Midwife in 2020 was commonly associated with the campaign. Similarly, papers judged to have been primarily focused on original research and reviews were considered to be at least somewhat influenced by Nursing Now, if the campaign was mentioned in the formulation of their studies, or as a talking point in discussion. A common reference was the Triple Impact report from the All-Party Parliamentary Group on Global Health.<sup>6</sup>

## Newspaper articles

A mixture of commentaries and editorials mentioned Nursing Now, with 212 newspaper articles from the English language press. Most of the articles (91) were published in 2019, with 66 in 2020 and 55 in 2018. In May of 2019 and 2020 there was a rise in the number of articles. This is likely to be due to the timing of International Nurses Day and the World Health Assembly. However, in 2018 the majority of the articles were published in March, after the global launch of Nursing Now in February 2018.

There is an extensive global reach, with articles being published in newspapers in all six WHO regions (Africa 28, Eastern Mediterranean 40, Europe 62, South East Asia 22, the Americas 40 and Western Pacific 12). A small number of articles (12) did not provide details of where they were published. Within the WHO regions, the top three countries that published the largest number of articles over the three years of the campaign

(2018–2020) were the UK (35), Qatar (24) and the United States (21).

More than half of the articles discussed the influence that the campaign was having. Thirty-five articles referred to investment in nursing associated with the campaign. Within these articles, many highlighted the influence of the campaign because it was discussed at meetings with governments, webinars and conferences, with many of these attended by Nursing Now board members such as Lord Nigel Crisp, Baroness Mary Watkins and Professor Sheila Tlou.

Many of the articles observed that Nursing Now had raised the profile of nursing within the country of publication and had given a platform to nurses to make a call for investment and be heard by policy makers. This was seen to be the case specifically in Qatar where a board was formed for Nursing Now Qatar and has been the driving force behind many of the Nursing Now activities in the country.

Various campaign launches were featured in 30 articles. This was a mix of the global launch of the campaign in February 2018, local launches and national launches such as Nursing Now Nigeria, Nursing Now Canada and Nursing Now Qatar. Many of the launches had the involvement of government ministers, nursing associations and other major health care stakeholders. Launch of Nursing Now groups were seen to be the most reported event over the three-year period.

Leadership was a theme running through multiple articles. The Nightingale Challenge was one of the most commonly mentioned leadership programmes, and reported on in several countries, such as India, Ghana, Qatar and the United States. The articles reported on the workshops and webinars that have been part of the Nightingale Challenge programme. However, Nursing Now has also prompted countries and health care providers to develop their own leadership programmes, such as in Qatar and Australia, also reported in the press.

## Websites

The review team analysed data from 157 websites. The biggest number of Nursing Now-related web-based publications was seen in 2019, with 66 articles identified. Rather surprisingly, given everything that was going on in the world to do with nursing in 2020 due to the Covid-19 pandemic, only 41 web-based publications mentioned Nursing Now that year.

5 World Health Organization (2020) *State of the World's Nursing 2020*, Geneva: World Health Organization, <https://www.who.int/publications/i/item/9789240003279>

6 All Party-Parliamentary Group on Global Health (2016) *Triple Impact: How developing nursing will improve health, promote gender equality and support economic growth*, London: APPG on Global Health, <http://www.appg-globalhealth.org.uk>

Almost half of the web-based articles reviewed were published in the UK, Australia and the United States, most likely because they are English-speaking countries and only articles published in English were included in the review. The most common area of interest in the Nursing Now-related articles were 'influence' followed by 'launch' and 'leadership'. Also mentioned and discussed were policy development in nursing, education, and nursing evidence.

Most web-based articles were published by nursing associations in collaboration with non-governmental organisations, local government and other organisations. This finding suggests a high level of buy-in from nursing associations. It was apparent that nursing associations played a key role in promoting the campaign and meeting its aims of raising the profile of nursing, additionally pressuring governments and policy makers to action the evidence provided by the campaign to invest in nursing and midwifery. The State of the World's Nursing report<sup>7</sup> was the most cited evidence for supporting the campaign.

## 4.7 The Nightingale Challenge: supporting young agents of change

The Nightingale Challenge grew rapidly in 2019 and until the start of the pandemic in 2020, and the story is told in Chapter 2. Of all the stories in this report it is the Nightingale Challenge that is still beginning, because it will continue, for at least two years, as the 'Nursing Now Challenge'. This is a mark of its success in supporting young nurses to be agents of change.

Nursing Now celebrated the work of Nightingale Challenge programmes in December 2020 by making resources available for the global Nightingale Challenge community on leadership development from around the world. From the 14th to the 18th of December 2020, Nightingale Challenge leadership training sessions and resources were shared online to support nurses and midwives and inspire health employers to prioritise the leadership development of their early-career nurses and midwives. Nightingale Challenge programmes from 14 countries shared their leadership development resources. Participating countries included: Australia, Germany, India, Malawi, New Zealand, Nigeria, Qatar, Spain, Taiwan, Tanzania, Turkey, Uganda, the UK and the United States.

## Nightingale Challenge Partnerships Platform

One of the greatest assets of the Nightingale Challenge is its global community and the opportunity this provided to build relationships among the international nursing and midwifery community, to share knowledge and to learn from health employers around the world.

To facilitate communication among Nightingale Challenge employers, the Nightingale Challenge Partnerships Platform (NCP) was launched in October 2020. This provided the opportunity for the development of collaborative relationships between participating Nightingale Challenge organisations as well as other health employers. Employers from every region chose to be a part of this platform and benefit from the experiences of colleagues worldwide. Partners were found locally, regionally or globally with the support of the Nightingale Challenge.

The Nightingale Challenge has facilitated cross-country linkages and strategic partnerships for knowledge sharing and advocacy. To date, the challenge has facilitated partnerships between more than 90 organisations, resulting in 48 partnerships, with some organisations choosing to work with multiple partners. Accessible on Facebook, this digital community has allowed health care employers and organisations to connect and form new partnerships, or strengthen existing ones. To date, partnered organisations have worked together to initiate research, develop plans to lobby policy makers, support nurses and midwives, and inspire them to engage with the future of their profession by raising the status and profile of nursing and midwifery worldwide.

## Nightingale Challenge Global Solutions Initiative

The Nightingale Challenge Global Solutions Initiative (NCGSI) is an initiative created to connect young nurses and midwives around the world and to allow them to share ideas and learn from diverse national contexts. The NCGSI provides a platform for nurses and midwives to demonstrate their entrepreneurialism, innovative ideas and critical thinking while encouraging the development of nurse- and midwife-led approaches that resolve global health challenges.

Since its launch in June 2020, the NCGSI has provided the opportunity for nurses and midwives to develop innovative solutions to ongoing global health challenges and share them with the global nursing community. So far there have been three NCGSIs, with winners from Ghana (two) and Indonesia (one). They will continue, encouraging young nurses to be innovative and bold agents of change.

7 World Health Organization (2020) State of the World's Nursing 2020, Geneva: World Health Organization, <https://www.who.int/publications/i/item/9789240003279>

The Nightingale Challenge is a significant legacy of the Nursing Now campaign. It will continue to encourage employers to invest in young nurse leadership development and link those young leaders so that they become a powerful learning and action group into the future. The goal now is to recruit more than 100,000 nurses into the Nursing Now Challenge by 2023. This will be a powerhouse for change in nursing.



**It's time for action:**  
**Protect and invest**  
**in nursing and the**  
**whole health team.**

## 4.8 One last push in 2021

Because of the interruptions of the Covid-19 pandemic, the Nursing Now campaign was extended until the end of May 2021, with a focus on advocacy and in particular on developing influencing skills among early-career nurses to engage directly with decision makers. This was an emerging context for the campaign. By 2021, the Year of the Nurse and the Midwife had ended, the pandemic was still raging but vaccines were also being administered; there were different priorities for the world and for nurses.

Many national and regional groups had transitioned to the ICN at the end of 2020, while the Nightingale Challenge was to become the Nursing Now Challenge and managed by Coventry University. But the campaign platform was active and was mobilised to become active advocates for nursing.

The WHO designated 2021 as the Year of the Health and Care Worker, with the aim of mobilising commitments from member states and financing and bilateral partners to accelerate the attainment of the Sustainable Development Goals (SDGs) and Covid-19 recovery. The campaign goals and messages aligned well with the WHO's Protect-Invest-Together objectives for 2021<sup>8</sup>.

A 'Nurses Together' initiative was launched at the beginning of February 2021 to an audience of more than 400 people from 64 countries, and designed to provide a focus for advocacy activity in the final months of the campaign. A particular goal was to encourage young nurses in the Nightingale Challenge to get involved in advocating to governments for increased investment in nursing. The initiative provided resources, case studies and insights from global experts in advocacy to help the Nursing Now network to make a strong case for investing in nursing.

### Advocacy resources

A new interactive toolkit was created to support nurses, providing a step-by-step guide to enable nurses to plan their engagement with decision makers, along with videos with hints and tips from leading advocates, a media relations guide, a social media toolkit and links to useful resources.

There was guidance and resources to help nurses plan meetings with elected representatives, create an elevator pitch, work with the media and use social media as an effective campaigning tool. Nursing Now curated a special Masterclass series, providing an opportunity for a more in-depth discussion on the use of data and advocacy and on influencing skills.

In the weeks before World Health Day (the 7th of April 2021), a template of a letter to a Minister of Health was made available to the Nursing Now network to be adapted to local contexts. The letter asked Ministers to do the following:

- Have the Chief Nursing Officer – or most senior government nurse – in the delegation to the World Health Assembly to discuss the strategic directions for nursing.
- Make a public commitment to implement the strategic directions.
- Commit to implementing decent working conditions for nurses, which include fair salaries, adequate facilities to practise in, adequate equipment and a policy and legislative framework that ensures recognition of advanced practice.
- Invest in developing the leadership skills of young nurses to keep them in the workforce and show how rewarding a career in nursing can be – to keep recruitment into the profession vibrant and attractive.

<sup>8</sup> [https://www.who.int/health-topics/health-workforce#tab=tab\\_1](https://www.who.int/health-topics/health-workforce#tab=tab_1)



**The Honourable Patty Hajdu**  
Minister of Health  
Canada

**On World Health Day 2021,  
Minister, we ask for your  
commitment to work with  
us to:**

- **Strengthen nursing practice**
- **Strengthen nursing policy and planning**
- **Tackle discrimination and disparities**



From Canada to Indonesia to Belfast, Nursing Now groups sent letters to their Ministers of Health on World Health Day. The group in Indonesia even made a film of nurses doing it.<sup>9</sup>

The additional six months of the campaign have allowed further development of the skills of advocacy for nurses, especially young nurses, which will endure when the campaign ends. It is this increased capacity that nurses have to bring about change which means that the platform for change is stronger and can support nurses for years to come.

## 4.9 The impact of the Covid-19 pandemic on the campaign

Many groups reported that the Covid-19 pandemic had led to their campaign plans being delayed, suspended or, in some cases, where it was possible, moved to an online platform. The impact of this was greatest for those groups signing up to the campaign just before and during the pandemic and recruitment of groups was slowed. Many Nightingale Challenge organisations were forced to postpone their planned activities, though some adapted their plans and connected with other organisations to share their experiences during the pandemic. One example of such a partnership is Northampton General Hospital NHS Trust and Wuhan General Hospital in China, which have been in regular contact since 2020 and have continued to

share experience and knowledge throughout the year. Information and experience have been shared on infection and prevention control, as well as strategies to ensure the well-being of and adequate support for nursing staff, including the development of the flexibility and resilience of early-career nurses.

Some groups in the Nursing Now survey reported that the Covid-19 pandemic had resulted in increased investment.

***“In Thailand we asked for the lead nurse to try and to help. So after that from Nursing Now campaign and Covid also we had a large investment in nurses with 1,400 positions, that never been the government position like this before.”***

Kanjana Chunthai, Nursing Now campaign board member, Thailand, interview 2021

However, the majority of groups, asked how the ongoing pandemic had impacted the nursing profession in their country, reported that while the pandemic had raised the visibility of nurses, it had also exposed the vulnerability of the nursing workforce.

***“... severely challenged by already deficit workforce. Forced to recruit regionally to cope during the impact. Nurses thrust into the spotlight; as evidence for the need of government to invest in this workforce. A renewed respect for nurses via levels of praise but realistically, how truly valued are we as a profession in***

9 The film can be viewed at <http://www.youtube.com/watch?v=1VGBYjbnztU&feature=youtu.be>

**relation to the need to increase salaries and working conditions, will be left to the test.”**

Survey respondent 25

**“I think the public is recognising that nurses have a greater scope and a greater impact ... during this time of Covid, ... we’re seeing nurses go to where the greatest need is across the country and that’s required that we see changes in the scope of practice, licensure agreements and that’s really changing an awareness of the impact that we can have. There used to be a lot of state resistance to that kind of expansion, at least temporarily during Covid that’s changed and I think I see the potential for that to stay changed for the long haul.”**

Maureen Bisognano, Nursing Now campaign board member, interview 2021

While the Covid-19 pandemic inevitably interrupted activities of the global campaign, and meant that travel was impossible, Nursing Now was able to respond to the changing context. The campaign offered support to nurses through webinars, by connecting them with each other and by working with partners. In many ways, the campaign had more global reach as a result.

The pandemic threw nurses into the spotlight in a way that had not happened for decades. Nurses responded magnificently, and Nursing Now was able to showcase leadership and innovation.

## 4.10 Case studies – agents of change

The following case studies tell some of the many stories of change that have been influenced by the Nursing Now campaign. Nursing Now has contributed to change happening through its global initiatives but the real agents of change are the nurses who form the groups and lead the local activities.

It is not possible to recount all the rich stories that have been collected so this section sets out some examples from each region of the world to illustrate the kinds of developments that have taken place.

### 4.10.1 Europe

In Europe, Nursing Now established a core partnership with the European Federation of Nurses Associations (EFN), which represents 36 member countries and three million nurses across Europe. As EFN was confirmed as the European Regional Lead for Nursing Now, it helped the campaign advance country-level impacts and present its work to a continent-wide audience. Nursing Now leadership gained the support of ministers of health and other government officials in many of these countries, with particular engagement from Spain, the UK, Ireland, Andorra and Slovakia.

In Spain, Nursing Now was featured at numerous national conferences, on national radio and on television programmes, by the General Council of Spanish Nursing, and through collaborations with more than half a dozen universities. Nursing Now Spain also established more than 100 local groups across the country. In the UK, Members of Parliament, the House of Lords and, perhaps most notably, the Royal Family, with special involvement from HRH The Duchess of Cambridge, all expressed public support for the campaign, which was also highlighted by publications and media ranging from *The Lancet* to the BBC to *People* magazine. Nursing Now England built a rapidly growing community of more than 2,200 ambassadors, with reach into more than 500 organisations, and created a strong platform of connections, activist leaders, resources and support networks. In Ireland, Nursing Now not only gained the backing of the Minister of Health and the Secretary General, but also publicised its efforts through the *World of Irish Nursing and Midwifery Journal*, which has a circulation of 35,000 members.

In Israel’s dedicated Nursing Week in 2019, the country’s President, the Ministry of Health’s CEO, the Chief Nursing Officer and the Chair of Israel’s nursing union, along with a number of nurses from the community, all received recognition and appreciation for their ongoing efforts in promoting nursing in the country.

### **Case study: Nursing Now Northern Ireland: influencing public health**

**“Nurses are the most trusted group of people. Rightly so. They treat individuals with compassion and care, and have great potential to improve the health of communities, through action on the social determinants of health.”**

Professor Sir Michael Marmot



Nursing Now Northern Ireland was launched in January 2019 by Professor Charlotte McArdle, Chief Nursing Officer, at a public health nursing conference, which was attended by student nurses, people who use health services, community and voluntary groups,

health and social care nursing and midwifery leaders, general practitioners and Members of the Legislative Assembly (MLAs).

With strong leadership from the Chief Nursing Officer, Nursing Now Northern Ireland provided a most comprehensive plan for nurses and midwives and their role in the Northern Ireland campaign's priority of public health. The Nursing Now programme had a special focus on:

- homeless health
- valuing diversity
- leadership in nursing
- leadership in midwifery.

### Nurses for Health Equity

Professor Marmot, in his keynote lecture at the launch of Nursing Now Northern Ireland, suggested that nurses and midwives develop a specific health equity role. Chief Nursing Officer, Charlotte McArdle, accepted this challenge as a great opportunity for nurses and midwives, recognising that they have a significant role to play in addressing the social determinants of health, achieving the Sustainable Development Goals (SDGs) and building a more sustainable and equitable world for all.

Professor Charlotte McArdle, Mary Frances McManus (Nursing Officer for Public Health), Dr Catherine Hannaway and Dr Billy Rosa, Consultant, with contributions from a range of nursing colleagues including Professor Aisha Holloway (Programme Lead for Research & Evidence at Nursing Now), developed Nurses for Health Equity: Guidelines for tackling the social determinants of health. The report, supported by the World Innovation Summit for Health, is due to be published in 2021.

### Leadership in nursing and midwifery

Nursing Now Northern Ireland launched the Nursing and Midwifery Task Group (NMTG) report in March 2020<sup>10</sup>. This report sets out the transformation required to ensure nurses and midwives lead the change agenda in rebuilding the health service in Northern Ireland and achieving the strategic vision for the health service set out in *Delivering Better Services*<sup>11</sup>.

The NMTG report set out recommendations that focused on:

- stabilising the nursing and midwifery workforce, therefore ensuring safe and effective care
- assuring the public, health and social care boards and the Department of Health and Social Care of the effectiveness and impact of nursing and midwifery care, through the development of a new statutory assurance framework for nursing and midwifery in order to underpin quality, safety and effectiveness
- facilitating the adoption of a population health approach across midwifery and nursing practice, resulting in improved outcomes for people across the lifespan – part of the extra funding for delivering care will strengthen public health nursing
- enabling the transformation of health and social care services through enhancing the roles of midwives and nurses within and across a wide range of multidisciplinary teams/services and developing a strategic plan that will systematically increase the number of advanced nurse practitioners, consultant nurses, consultant midwives and clinical academic nurse and midwife roles.

Work to implement the recommendations of this report has commenced and continues to progress.

### 4.10.2 Eastern Mediterranean

The efforts of Nursing Now Jordan's country group were spearheaded by HRH Princess Muna Al Hussein, a long-time supporter of nurses and the President of the Jordanian Nursing Council. HRH Princess Muna Al Hussein established a Nursing Policy Forum and a special national committee on the State of the World's Nursing report. Her Highness also served as a spokesperson in high-level meetings in both Jordan and multilateral forums, such as the 73rd World Health Assembly and the 2020 TRIAD meeting, bringing together the WHO, the ICN and the ICM. In addition to developing a number of nursing policies and bylaws, Nursing Now Jordan developed various capacity-building training sessions, online courses and multi-day workshops, targeting students, practising nurses and nursing leadership and reaching all of the country's governorates.

Nursing Now Qatar hosted successful regional policy dialogues, attracting hundreds of policy makers, nurses and midwives, in addition to advancing training and community outreach efforts. The World Innovation Summit for Health in Qatar along with Sigma demonstrated the common-good approach in

<sup>10</sup> <https://www.health-ni.gov.uk/publications/nursing-and-midwifery-task-group-nmtg-report-and-recommendations>

<sup>11</sup> <https://www.health-ni.gov.uk/topics/health-policy/developing-better-health-services>



supporting 23 young nurses from across the globe to experience global health policy review, debate and approvals by way of attending the annual World Health Assembly, the decision-making body of the WHO (reported in Chapter 2).

**Case study: Lebanon – a special case:  
'Communication, visibility, power of the message:  
raising the voice of nurses in Lebanon for getting  
their rights'**

Since the Lebanon Nursing Now group launch in February 2019, priorities have included developing capacity-building opportunities, supporting the development of specialised nurses associations and advancing relevant lobbying and policy work. In 2020, Beirut was rocked by a disastrous chemical explosion and the global nursing community responded with support of many different kinds, initially connecting through Nursing Now and then the ICN.

Lebanon's national Nursing Now group reported the influence of Nursing Now as a campaign on the nursing profession in Lebanon. The group's focus was identified as being on advocacy, fundraising, engaging in workshops, policy change, linking with international groups, engaging young nurses and securing rights for Lebanese nurses.

The ICN CEO attended the launch event and other national stakeholders included the Ministry of Health, the Ministry of Labour, colleges and schools of nursing, universities, the WHO national/regional office and non-governmental organisations/international non-governmental organisations.

Following the launch of the Nursing Now group, the Order of Nurses of Lebanon (the professional association) forged a place at the health national decision-making table. Decrees were issued to support the profession in terms of continuing education and the profession's regulations. Media shed light on the work of nurses, so the people of Lebanon are more aware now of the importance of the

work of nurses in the health care system. The Lebanese nurses felt they were part of the bigger international community of nursing.

This is significant because it empowered the nurses and the nursing students who were introduced into the Nursing Now activities.

***"Being part of Nursing Now helped us to speak more about the impact of nursing on the health care system ... it [the campaign launch] also gave more visibility to the nursing profession. Nursing Now helped us to anchor nursing students with the profession. A very big number of nurses and nursing students, around 10,000 nurses, have been involved in activities."***

Myrna Abi Abdallah-Doumit, President Order of Nurses in Lebanon.  
Nursing Now group lead

In May 2019, the group created a national community media campaign to raise the profile of nurses across Lebanon.

***"The only barrier we faced was how to secure funds to cover the campaign. The challenge was how to raise awareness about the nursing profession among multiple audiences and how to make our campaign reach all Lebanese regions. It was successful as it was the talk of the town. Nursing Now was like our key for achieving our goals. The nature of the influence was at two levels: at the nurses' level, we raised the self-esteem and self-confidence in their power of change; at the population level we raised recognition of the nursing profession and the impact on safety and health."***

Myrna Abi Abdallah-Doumit, President Order of Nurses in Lebanon.  
Nursing Now group lead

Influence was reported to affect politicians, media, policy makers, nurses, non-governmental organisations, the army and the Lebanese people.

### 4.10.3 The Americas

Nursing Now Canada was launched in June 2019 at a multi-stakeholder, international colloquium in Vancouver, British Columbia, co-hosted by the Canadian Nurses Association (CNA) and the ICN. Nursing Now Canada's founding partners developed a vision built on three key pillars: nursing leadership, Indigenous health, and supporting the institution of Chief Nursing Officers. The group's goals and activities aligned with the WHO's 17 Sustainable Development Goals (SDGs), as well as the United Nations Declaration on the Rights of Indigenous People (UNDRIP) and the Truth and Reconciliation Commission of Canada's Calls to Action (TRC). In an attempt to expand influence outside of collaborations with national-level professional and governmental bodies, Nursing Now Canada also focused on reaching youth, including through involvement in Canada's

Global Health Workforce Network (GHWN) Youth Hub, with a particular focus on developing an advocacy toolkit.

In the United States, in addition to achieving collaborations with various universities and health systems – including the Cincinnati Children’s Medical Center, the Indiana University Health System, the University of North Carolina at Chapel Hill, the University of Washington School of Nursing, the Boston University School of Public Health, Duke University and Frontier Nursing University – Nursing Now also developed partnerships with the Institute for Healthcare Improvement (IHI), the National Academy of Medicine and the WHO Collaborating Center for Nursing Knowledge, Information Management and Sharing at the Johns Hopkins School of Nursing. There were also smaller coalitions focused on more local impact, such as the Leadership Coalition for School Nurses in Massachusetts.

To further expand the campaign’s influence, Nursing Now leadership also joined the National Academy of Medicine Commission and the Harvard Global Nursing Leadership Advisory Council, meeting regularly, respectively, to discuss needs and opportunities for nursing education and to design a global curriculum for nursing leaders. Beyond connecting with students, practising nurses, nursing leadership and government representatives to herald the importance of nursing and the need for various actions to support the field, Nursing Now USA also developed numerous projects around the Nightingale Challenge. Some of the challenge’s key areas of focus emphasised the scaling of impact through local network building and through developing modularised resources, such as: messaging toolkits to recruit additional nurse leaders to the challenge; resources to aid in leadership skill development; and recruitment strategies to reach health care organisations across the country.

In South America and the Caribbean, Nursing Now groups developed networks with Ministries of Health, national nursing bodies, universities and high-level government officials. Together they supported and helped to advance campaigns centred in countries including: Grenada, Jamaica, Trinidad & Tobago, Barbados, Costa Rica, the Dominican Republic, Saint Vincent and the Grenadines, the Bahamas, Mexico, Brazil, Argentina, Peru, Bolivia, Uruguay, Chile, Panama and Colombia.

### **Case study: The Bahamas**

Despite the impact of Category 5 Hurricane Dorian on The Bahamas on the 1st of September 2019, which was among the worst natural disasters ever experienced



by the country, The Bahamas supported the development of Nursing Now groups in The Bahamas and in other countries such as Grenada and Trinidad & Tobago. Interview data from Rosemarie Josie, Deputy President for the Commonwealth Nurses and Midwives Federation, and board member for the Nursing Now global campaign for the Americas, provides a unique insight into the influence of the Nursing Now campaign and the change it has brought to these islands.

***“[T]he campaign has assisted us with advocacy and preparing our nurses for the future in various countries, to become leaders and to become strategic. And that means networking with key stakeholders, both nationally and internationally, as we worked together in partnership to implement national policies towards achieving optimum health, as well as the well-being of our people in The Bahamas towards universal health care ... We also lobbied our government and our Health Minister, our former Health Minister who worked very closely with us, in changing the culture of health policy decision making, that nurses and midwives actually have a seat at the table when important decisions are being made, that will impact our patients’ safety, the scope of our practice and our working environment.”***

Rosemarie Josey, Nursing Now campaign board member interview, 2021

The government of The Bahamas planned to repeal and update the Nurses and Midwives Act (1971), something nurses and midwives in The Bahamas had been trying to achieve for many years. Due to the second wave of Covid-19 in the country, progress of the Act has slowed. However, the pandemic has also raised the profile of nurses across both the public and political landscapes in The Bahamas, leading to increased awareness.

***“When we look at the COVID-19 pandemic crisis it has opened new doors for nurses. For instance, in terms of nursing education curriculum, new directions of disaster management and greater emphasis on leadership for our young nurses. The awareness of Nurses Now has empowered our nurses to take their***

**seat at the table, find their collective voice and become more visible as they tackle the 21st Century Health challenges. Our value, our status and profile has increase significantly due to the various expanding roles and contribution to the current health care crisis.”**

Rosemarie Josey, Nursing Now campaign board member interview, 2021

Future plans with the new Health Minister look positive for the nurses and midwives of The Bahamas:

**“[H]e has some plans on the drawing board. Of investing in our nurses. So he’s really taken up the mantle and I think he’s bringing a different perspective to how they viewed nursing and nursing. And they recognise that they can’t do anything without our nurses. And he recognised that [nursing is a best buy], so I have a great feeling that he will work closely with us... he brings a different perspective.”**

Rosemarie Josey, Nursing Now campaign board member interview, 2021

### **Case study: Mexico: Bringing student nurses together to speak with one voice**

**“Our goal is to bring student nurses together to speak with one voice and we are very excited of what we have achieved so far with the help of the Nursing Now campaign.”**

George Chale, past President, Asociación Mexicana de Estudiantes de Enfermería (AMEENF)

Student nurses often feel excluded from decision-making processes and lack the confidence to speak out on issues that impact them and the nursing profession. Like many other middle-income countries, Mexican student nurses feel like they have worked in isolation and grappled with these issues within a fragmented and complex health care system.

While things are changing in Mexico and nurses are developing more professional autonomy, student nurses struggle to participate in political and policy decisions at a local, national or international level. The Nursing Now campaign has been the catalyst to bring student nurses together to speak with one voice to impact policy decisions in their own country and across the South American region. The positive impact of student nurses coming together has motivated them to participate in professional debates and to create alliances and learning across countries and it has empowered them to ensure that their voice is heard in the policy arena in Mexico and abroad.

### **Using social media to bring people together**

Frustrated by a fragmented system where their voices were not heard, student nurses in Mexico were



inspired by the Nursing Now campaign to join together to form AMNEEF, the first Mexican Nursing Students' Association. They wanted to bring student nurses together to raise their voices to speak on issues that were important to them, to influence policy decisions and to empower nurses to engage with local, national and international nursing issues. This new national association of student nurses in Mexico was founded by a few passionate students and information was shared via social media platforms around the country. The group had no budget – only a youthful desire to see change and the passion and determination to make it happen. The AMEENF started with 10 associates and they have grown together as a team, bringing personal and professional development. The AMEENF now has more than 300 members in Mexico with 150,000 followers on Facebook worldwide. This is a remarkable achievement in two years and the group is going from strength to strength.

### **Creating alliances and learning across countries**

In order to increase the scope and profile of the AMEENF, the founding associates reached out to nurse leaders at local, national and international levels, starting with graduated nurses. They were very supportive of the goals of the AMEENF and helped the group to contact senior leaders at the regional ministries of health (chief nurses of state) and, through these contacts, the National Ministry of Health. Six months later the AMEENF was invited to speak at a national conference of nurse leaders in Mexico City. These positive experiences of engaging with regional and national nurse leaders and policy makers developed confidence in these student nurses to believe that their voice could be heard in the wider arena. Empowered with new skills and confidence, the student leaders reached out beyond their Mexican borders to engage and enthuse student nurses in other South American countries, such as Colombia, El Salvador, Peru, Brazil and Costa Rica.

### **Empowering student nurses to speak with one voice**

Inspired and motivated by the Nursing Now campaign,

student nurses in Mexico were able to begin to participate in decision making in the health arena in Mexico. By forming the AMEENF, they were able to join together within, and across, countries to share knowledge and to learn from their different experiences. They were also able to represent the student nurse voice with the local and national Ministry of Health in Mexico. They were helped along the way by influential senior nurses and representatives in the academic and national nursing spheres. Through excellent networking skills, the AMEENF is now engaged with the Mexican Chapter of the ICN (Colegio Nacional de Enfermeras A.C.), the Chief Nurse, Mexico (Claudia Leija Hernández) and the global Sigma Nursing movement. The AMEENF continues to go from strength to strength, now exploring funding opportunities to build on its successes and expand its reach.

#### 4.10.4 South East Asia

##### **Nepal: Developing nursing leadership in Nepal**

***“Nursing Now is not only for now, nursing is forever.”***

Roshani Tui Tui



With the support of the ICN, the Nursing Now group in Nepal negotiated the appointment of the first Chief Nursing Officer for Nepal, Roshani Tui Tui. Roshani and her team have set about creating structures to support the development of nursing in Nepal. A national review led to the development of a national job role descriptor for nursing that they hope will prevent role conflict with other professional groups. In a system where only medical protocols existed, they identified a need for nursing protocols to guide clinical activity. Over the past two years the team have developed two protocols with related education modules, and five further continuing professional development modules to support nurses to re-licence. The Chief Nursing Officer appointment has also enabled nurses to have a voice in the strategic decision-making and policy processes. Valuing this leadership role is a strong

driver to implement leadership training and mentoring opportunities for young nurse leaders in Nepal.

#### **Networks for delivering educational programmes**

Providing education to nurses working in communities and hospitals has been a key part of the Nursing Now group's work in Nepal. With nurses working in a range of geographically dispersed settings, the connectivity provided by Nepal's network of nursing associations has been crucial to reaching nurses and providing educational opportunity. The first education programme had only just begun when the Covid-19 pandemic hit the country and changed both the priorities and the methods of engaging in education. Supported by the WHO, the group were able to pivot their training into the online environment and provide educational resources to support nurses with clinical work with Covid-19 patients, and with their own well-being. The 50% growth in the number of nursing associations during the Nursing Now campaign supported the increased reach of these educational resources.

Running through all of the achievements of Nepal's Nursing Now group is the sense of empowerment that they have experienced through their connections with international agencies such as the ICN and WHO, and international nursing colleagues – empowerment that has enabled engagement with their government, leading to the Chief Nursing Officer appointment, inclusion in policy making and support for educational programmes. Continuity of these connections, beyond the end of Nursing Now, is important to enable the journey that has only just started in Nepal.

#### 4.10.5 Western Pacific

##### **From Australia to the Republic of Korea**

Nursing Now Australia was launched in April 2019 in partnership with the Australian College of Nursing (ACN) and six other major nursing organisations in Australia. In addition to developing relationships with the Australian Nursing & Midwifery Federation (ANMF) (Australia's largest union) – as well as the country's Minister of Health, state-level health executives, and the Council of Deans of Nursing, Australia and New Zealand – the group secured partnerships from about 10 nursing organisations in advancing the Nightingale Challenge. To engage the public in the campaign, Nursing Now Australia and its partners also convened and participated in a variety of conferences and other events across the country – including, uniquely, a series of 'Roadshow' events spanning six months and 18 cities and regional towns across Australia, which provided forums for discussion and debate regarding the future of health care in Australia through the lens of the *Triple Impact* report.<sup>12</sup>

12 All-Party Parliamentary Group on Global Health (2016) *Triple Impact: How developing nursing will improve health, promote gender equality and support economic growth*, <http://www.appg-globalhealth.org.uk/reports/4556656050>

In addition to work in policy, training and education, and outreach, the Republic of Korea gained particularly notable financial investments for nursing, including: securing approximately 10 million US dollars (USD) for a pilot project for education specialist nurses in South Korea; securing funding for a public health scholarship to support 20 nursing college students; and securing approximately 27 million USD from the South Korean National Assembly to support nurses in the Covid-19 pandemic. South Korea also created a national-level government consultative body for improving the working environments of nurses, revised its medical law to introduce a clinical training system for new nurses, organised policy forums, hosted national-level events and developed innovative outreach and communications efforts to raise the profile of nursing across the country, including photo exhibitions, writing contests and public campaigns.

### **Case study: The Philippines**

Romnick Aguilar is a Chief Assistant Nurse from the Philippines. He is passionate about the role that young nurses can play in the health system, and advocates for nursing leadership. Here, he describes his experience in launching the Nightingale Challenge in his province of Laguna:

***“In May, I was given the opportunity to participate in the Nursing Now Pre-World Health Assembly Young Nurses event in Geneva, Switzerland. During the course of the event, I learnt so much about leadership, networking, how to influence global policy making and making a difference to raise the profile of nursing. Since then, I have been advocating for nursing leadership and networking to promote this cause in the Philippines.***

***I soon realised that Nursing Now’s Nightingale Challenge would be a great way to support the development of young nurses, while promoting the collaboration between public and private hospitals. I quickly started to plan on how I could move the Province of Laguna to launch this one-of-a-kind programme. I reached out to the Laguna Nurse Administrators, a group of Nurse Executives working in Public and Private Hospitals. I presented the Nightingale Challenge and my proposal and to my great surprise, they all agreed to launch the Nightingale Challenge in all public and private hospitals in the Province of Laguna on 30th August 2019.***

***The launch event: ‘The Nightingale Challenge Philippines: Laguna Nurse Administrators Global Campaign Forum’ took place on 30th August and was***



***attended by many high-level stakeholders. During the event, the participating stakeholders signed the Pledge of Commitment for the Nightingale Challenge. They were also introduced to the Online Registration for the Nightingale Challenge and an Open Forum to establish networking and sharing of best practices between hospitals.***

***A total of 30 public and private hospitals accepted and pledged their commitment to the Nightingale Challenge. The Province of Laguna is the first province in the Philippines to launch the Nightingale Challenge simultaneously in all public and private hospitals.***

***I hope that next year we will have the opportunity to host an event for all of the participating countries to come together and share their experiences and best practices.”***

Romnick Aguilar, Chief Assistant Nurse, the Philippines

Since his participation in the pre-World Health Assembly event in 2019, Romnick has taken part in many Nursing Now Nightingale Challenge webinars during which he has shared his experiences and undoubtedly inspired and motivated others.

### **4.10.6 Africa**

A number of groups across Africa achieved notable influence from government leadership. Nursing Now Lesotho, for example, developed a stakeholder group convened under the patronage of HRH Princess Maseiso Bereng to advance communications and outreach campaigns, elevate nurses to leadership roles, expand educational and training opportunities, and support bottom-up networking and organisation. Another example of high level government engagement can be found in Kenya, where the country’s Nursing Now group was launched at an event attended by the First Lady of the Republic of Kenya, HE Margaret Kenyatta, whose support was key to furthering policy, such as the Nursing and Midwifery Policy, and

attracting investment, such as the financial support offered by the United Nations Population Fund (UNFPA) to advance national initiatives. Similarly, in Zimbabwe, when the country's Nursing Now campaign was launched, the event was attended by the First Lady of Zimbabwe, the Minister of Health and various other high-level stakeholders and policy leaders from across the country, which laid the foundation for the successful introduction of the Nightingale Challenge to the Director of Nursing Services and the pursuit of other campaign priorities.

Nursing Now Rwanda placed heavy emphasis on network development, capacity building and grassroots strategies to improve health care. The country's campaign conducted broad outreach around International Nurses Day and Nursing Week celebrations, organised meetings to bring together key stakeholders and elevate the profile of nursing, and offered training opportunities both for continuous professional development and for licensure exam preparation. At a community level, the campaign also offered screenings for non-communicable and infectious diseases and opportunities for family planning education, and gathered funds for 1,000 community members to gain community-based health insurance. Finally, Eswatini, Tanzania and Nigeria all engaged their national Ministries of Health and other national bodies in launching their Nursing Now campaigns and working collaboratively to advance priorities in policy and legislation, training and education, nursing leadership development, health care improvements and public outreach.

### **Case study: Transforming nursing and midwifery leadership in Uganda**

The importance of building leadership capacity in nurses and midwives has been identified as a priority by the Commissioner of Health Services (Nursing and Midwifery), Ms Beatrice Amuge, who said:

***“The need to strengthen leadership and visibility of nurses and midwives at all levels of the healthcare system in Uganda is a key priority in order to improve care and patient outcomes.”***

Nurses and midwives make up 73% of the public health system's professional workforce in Uganda and contribute 80% of the health care to patients and communities. They are usually the first point of contact for most patients. Achieving universal health coverage in Uganda, among other national and global targets, depends on empowering nurses and midwives to build on and expand their knowledge and skills and maximise their contribution. Investing in the development of nursing and midwifery leaders in



Uganda will empower them, strengthen their ability to advocate, contribute to policy development and ultimately strengthen the economy and provide better health care in the country.

There is a need for competent nurse and midwife leaders in the country who are skilled with both advocacy and technical knowledge to enable them to influence policy development and bring about functional regulatory reforms in their professional services. They will be positioned to address the challenges facing nurses and midwives to ultimately strengthen the health care system.

The Ministry of Health in Uganda has been working with a wide range of partners – which include the Ministry of Education, the WHO, the Uganda Nurses and Midwives Council (UNMC), the Uganda Nurses and Midwifery Union (UNMU), IntraHealth International, Jhpiego, Uganda-UK Health Alliance, the Uganda Private Midwives Association (UPMA), the Makerere/Mulago Palliative Care Unit (MPCU), the Aga Khan University (AKU) and Clark International University (CIU) – on leadership development through the Nursing Now campaign and the Nightingale Challenge 2020.

Nursing Now has had an impact especially on education and practice. Nurses and midwives have been able to advance by going to a higher level of education such as diplomas, degrees and Masters, because of the skills that some of the nurse and midwife leaders acquired through Nursing Now training in leadership skills. Research skills were instilled in some nurses and midwives and now they are actively involved in operational research to improve day-to-day performance. All this has impacted on the nurses' and midwives' status and also on patient care.

Other key achievements have been the approved nursing and midwifery Scheme of Service, which has put nurses and midwives in public service on a par with all other public service officers in terms of both

promotional titles and salary scale. For example, there is now: an appointed Commissioner of Health Services – Nursing and Midwifery (Chief Nurse) (now a substantive post instead of being an acting post); and an Assistant Commissioner – Nursing. And there are more posts to be filled, e.g. Assistant Commissioner – Midwifery and Principal and Senior Nursing Officers. Thus, nurses and midwives are represented within the Ministry and have a seat at the table. Nursing Now has been a catalyst in this change through bringing the focus on nursing and midwifery and also on the importance of leadership in the field.

#### **4.10.7 In conclusion**

The rich tapestry of stories from around the globe has been what has created the narrative of Nursing Now. The Nursing Now campaign set out to influence global policy and to support local action, and in this chapter we have seen ways in which both of these strategies

have been implemented through the work of all the stakeholders in the campaign, but especially through the nurses who have joined the campaign and been our agents of change.

The telling of the stories can only be representative in a short report, but the case studies presented in this chapter, and the picture of strong global platforms that ensured the reach and influence of the campaign, indicate the commitment of so many organisations and individuals to achieving the overall goal of the Nursing Now campaign – to raise the status and profile of nursing around the world.

Nurses and their allies have created an extraordinarily powerful platform from which to improve health and develop nursing. It can offer enormous hope for us all for the future.

# Chapter 5

## Building the future - keeping up the momentum

***'We continue to work together to carry on this inspiring work of Nursing Now and to ensure that nursing is not just for now but fit for the future...that is the legacy'***

Elizabeth Iro, Chief Nursing Officer, WHO. Interview 2021

The Nursing Now campaign started because of the visionary determination of a few people to improve health by raising the profile and status of nurses and in just over three years, it has grown into a visible, active campaign supported by nurses and others in 126 countries. Its rapid growth and sustained vibrancy reflect the relevance of the campaign messages to nurses and others everywhere: nursing has the potential to be a major contributor to achieving health goals if enabled to do so by investments in decent working conditions, appropriate education and strong leadership.

Many challenges await those planning future health services, not least of which will be a shortage of health workers. The Covid-19 pandemic has revealed the vulnerabilities of health systems and the critical need for national investment to rebuild health systems that can respond to shocks, recruit and keep a diverse workforce and contribute to a healthier society. Going forward, the horizons are even broader: there are issues of planetary health and our environment; there will be a huge need for support for mental health for everyone including health workers and there is a deeper understanding of health as human flourishing – being connected to each other and contributing to a thriving society. Nurses have a big role to play as agents of change in their communities.

### 5.1 A platform for the future

Some important lessons have been learned from the Nursing Now campaign which constitute the framework for building the future of nursing. The first is the changing narrative about nursing that the campaign has started and that has been influenced by the global pandemic too. The campaign encouraged nurses everywhere to work together for the changes they wanted to see, and to look outside the profession too, and speak to politicians and policy makers. The campaign was a convening platform for nurses and

it showed the power of acting together and finding powerful allies. The Nursing Now groups created a new global solidarity, allowing international partnerships, the exchange of ideas and mutual support, all of which proved to be of great value as the pandemic raged.

Sustainable long-term change in nursing will take a generation or more as hierarchies are broken down, attitudes change towards women, and a new and more holistic understanding of health takes hold in the population. Nurses will be at the forefront of all these changes – demonstrating by the actions and their values how health and society can be improved for the future. But this campaign has put these long term changes on fast forward: our recommendations are made so that change is not stalled at this point in global health history when nurses are needed most.

Many Nursing Now groups with their ability to bring together different organisations, nursing and non-nursing, in a common purpose will continue to operate into the future and will continue to convene and act as a platform for change. ICN will continue to support the groups as it has started to do with joint work on advocacy and responding to Covid-19. WHO will be publishing its *Strategic Directions for Nursing and Midwifery* this year so ICN and the groups have an opportunity to work together to implement those recommendations – so critical to progress the nursing profession to contribute as fully as possible to all health goals.

### 5.2 Sharing and learning

The second lesson, that leads to a future different from the past, comes from the founding values of Nursing Now: everyone has something to teach and everyone has something to learn. This report has stressed that the Nursing Now story is not just one story, but many individual and collective stories linked together locally, nationally and globally. And developments in different parts of the world have been different and taken place on different timescales. But everyone has been able to learn, connected from workplaces and homes around the world, and everyone has had a chance to teach through the diversity of media that the campaign has used.

Especially inspiring has been the inclusion and contribution of early career and young nurses. Nursing has had a terrible reputation for a long time for not appreciating or supporting its students and new graduates but the campaign has made a substantial contribution to changing this story. Through the Nightingale Challenge new leadership opportunities have emerged for young nurses. The campaign has asked for young nurses to be active participants in international press briefings, meetings with high level influencers, and speakers at a range of webinars. They have stepped up to take full advantage of their opportunities.

***“No one knows how much I am proud to be part of Nursing Now family, hope you noticed that I was in my Nightingale Challenge T-shirt. .... I am so humbled for the great opportunities. You remember at the World Health Assembly, I told you that I was in a closed basket serving community and no one could see the work I was doing until Nursing Now uncovered me. Thank you for appreciating our talk, I am absolutely happy to continue working with you!”***

Harriet Nayiga (Uganda) after she took part in a WHO press briefing 2021

***“I think personally the campaign has really been life-changing as well because it also helped me really realise a lot of my strengths as a young nurse and also to be able to have a lot more confidence in programmes and to like open up ideas as well in terms of solutions within health. Yeah, that for me has really been amazing.”***

Munashe Nyika, Nursing Now Campaign board member interview 2021

The Nightingale Challenge will continue as the Nursing Now Challenge, supported by the Burdett Trust for Nursing. It will continue to grow and offer opportunities for early career nurses and young nurses to develop their leadership skills and communicate globally.

The connections that nurses have made with each other around the world, using social media, can also continue to grow. A new culture of connectedness has been established, influenced by pandemic restrictions but modelled too by the Nursing Now campaign. The analysis of the Nursing Now digital footprint clearly shows how connected the world of nursing is, especially young nurses. This is the future.

***‘The work is not finished, we have only just begun!’***

Professor Sheila Tlou, Co-Chair, Nursing Now campaign board

Connections outside nursing have also been important with many non-nurses advancing the arguments made by Nursing Now. The campaign has demonstrated the importance of having allies: whether on the Nursing Now board – made up of 2/3 nurses and 1/3 non-nurses - or among global and national politicians, the campaign’s champions, and in national and local Nursing Now groups. These allies can often reach places and influence groups whom nurses cannot easily reach.

The campaign has also demonstrated clearly the way in which nurses can be agents of change. The Lancet Commission on The Education of Health Professionals for the 21st Century led by Julio Frenk and Lincoln Chen and with Afaf Meleis, a distinguished nurse, and Lord Nigel Crisp among its members has used this concept to describe the role of professionals.<sup>1</sup> It identifies three levels of education for health professionals: informative learning which is about acquiring knowledge and skills; formative learning which is about socialising students around values and creating professionals; and transformative learning is about developing leadership attributes and producing enlightened change agents.

Health professionals as change agents are the leaders, the innovators, the movers and shakers – the people who make things happen in the interest of patients and the population. In nursing they are the service leaders, running clinics and services, nurse practitioners and everyone who is developing new and better approaches to care, treatment, prevention, and health creation.

The Nursing Now campaign has shown the powerhouse for change that is built when relationships are created and nurtured, when talent and ideas are appreciated, when there is a will to change, and when nurses are empowered to be agents of change. The Nursing Now team hope that this is what is left in the wake of all the campaign activity.

The last words go fittingly to the two campaign board co-chairs who between them have modelled these relationships: one a nurse, the other not; one African, the other European; one a woman and one a man – and both of them agents of change. Independently, they highlighted that though the formal global campaign is ending, the work goes on with our partners ICN and WHO and with the Nursing Now Challenge.

***‘The campaign’s over but the story continues’***

Lord Nigel Crisp, Co-Chair, Nursing Now campaign board

1 Frenk J, Chen L, Bhutta ZA, Cohen JJ et al: Health professionals for a new century: transforming education to strengthen health systems in an independent world: *The Lancet*, London, 29 November 2010; DOI:10.1016/S0140-6736(10)61854-5

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Among our champions we are honoured to have Her Royal Highness Princess Muna Al-Hussein of Jordan who is a long time supporter of nursing and we are so grateful for all that she has done to support the campaign.

We were fortunate, in 2019, to engage our Ambassador, Emilia Clarke, who has given her time generously to the campaign and we offer huge thanks.

Throughout the campaign, the WHO and the ICN have been staunch partners, with Dr Tedros Adhanom Ghebreyesus personally engaged and particularly strong support from James Campbell, Director of the Health Workforce Department, at the World Health Organization (HWF/WHO) and Elizabeth Iro, WHO Chief Nursing Officer. The ICN President, Annette Kennedy, Howard Catton, ICN CEO have been excellent allies. We

thank our partners most sincerely for all that you have done for the campaign.

Without the Burdett Trust for Nursing (BTFN) this campaign would not exist and we thank especially Mr Alan Gibbs, Chairman of the BTFN Board, and Ms Shirley Baines, CEO of the BTFN who have provided consistently strong support to the campaign.

We are grateful to everyone who has given their time and expertise to make the campaign successful. You have made it possible to reach across the globe to nurses everywhere and unite them in a common vision for a stronger and more visible nursing workforce that will be able to make a real difference to health and well-being.

We thank you all for your support for Nursing Now and hope that you will continue to be allies for nurses and advocates for greater investment in nursing.



**Lord Nigel Crisp**

Co-Chairs of the Nursing Now Campaign Board.



**Professor Sheila Tlou**

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## The steering group 2017

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Baroness Mary Watkins  
Professor Maureen Bisognano  
Professor Kathleen McCourt  
Professor Rowaida Al Maaitah  
Professor Srinath Reddy  
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Amanda Cheesley  
Dr Johanna Riha  
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| Professor Srinath Reddy                 | Professor Elizabeth Adams | Sarah Walji                 | Professor Jill White         |
|   | James Campbell            |                             |                              |

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## Campaign champions

|                               |                              |                    |                      |
|-------------------------------|------------------------------|--------------------|----------------------|
| Dr Tedros Adhanom Ghebreyesus | Donald M. Berwick            | Dame Yvonne Moores | Tim Evans            |
| Elizabeth Iro                 | Sir Simon Stevens            | Dr Shoshy Goldberg | Dr Natalia Kanem     |
| HRH Princess Muna Al-Hussein  | Sir George Alleyne           | Ann Keen           | Dr Jaouad Mahjour    |
| Dr Victor Dzau                | Christie Watson              | Dr Sania Nishtar   | Patricia Scotland QC |
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## Nursing Now secretariat

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| Nik Payne           | Matt Daley                   | Acting Executive Director June |
| Yvonne Mwiza        | Dawn Driscoll                | 2017-July 2018                 |
| Anthony Harbin      | Sarah Kline                  |                                |

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## Donors to Nursing Now

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