

As nursing goes, so goes public health

BY ANTONIA M. VILLARRUEL AND CLAIRE M. FAGIN, OPINION CONTRIBUTORS — 09/03/20 03:00 PM EDT
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As countries around the world seek to contain the deadly [coronavirus pandemic](#), there is a renewed and growing appreciation for nurses, and especially for those serving on the front lines, whether at testing sites, triage tents, ICUs, or conducting telehealth visits. The gratitude of the public for those in the nursing profession — who risk contracting the virus while working long hours and comforting patients, and who continue to advocate for mask wearing, social distancing and hand washing — honors these health care heroes, and deservedly so.

In many ways, nurses are leading entire health care systems, teams of researchers, care providers and more in the ongoing effort to keep families, schools and communities safe and healthy. To say that nurses are the backbone of health care around the world would be insufficient — they are the very lifeblood. As nursing goes, so goes public health, which is why the public must focus its attention on what is happening with nurses in this time of crisis.

It is bittersweet that 2020 [was designated](#) by the World Health Assembly as the “Year of the Nurse and the Midwife.” More than just a celebration of the largest group of health providers worldwide, who account for [more than 50 percent](#) of the global health care workforce, this declaration was intended to elevate the status and profile of nurses by recognizing the enormous contributions their profession makes to public health and health care delivery. And while the designation is a mixture of happiness

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and sadness, we're witnessing in real time the incredible impact that nurses and nursing have had on public health and health care delivery over these past few months.

As the pandemic spread across the [United States](#), nurses ran toward the crisis, not away from it. In health care settings across the country, nurses have chosen to be at patients' bedsides, watchful for subtle changes that might demand action and implementing innovative approaches to care, such as the positioning of patients to promote easier breathing. In many cases, nurses are the only connection that patients have with family members, who cannot visit. All too often, they have been called upon to ensure that dying patients are not alone.

Nurses don't abandon patients — and, as we continue in this pandemic and beyond, we must ensure that we do not abandon nurses. We must address the continuing [personal protection equipment shortages](#) that affect nurses and other health care workers who are trying to stay well so they can continue caring for patients. As hospitals experience [financial challenges](#) related to the care of COVID-19 patients and the loss of revenue from canceled elective procedures, nursing positions may become prime targets for "cost reduction," and we must advocate for nurses if we are to advocate for patients.

There is ample evidence to indicate that when there are reductions in nurse staffing, patients are harmed by a [corresponding reduction](#) in the quality of care. And finally, in response to the pandemic, [state](#) and [federal regulations](#) and policy barriers were temporarily lifted to allow nurses and other health care workers to practice to the full extent of their rigorous education and training.

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Although this was done in response to a need born out of a crisis, this change for nurses — and the benefits to public health and health care delivery that came with it — should not be temporary. The public must ensure that it is not once again cheated out of improved access to high-quality health care. To do so, it must make certain that the nursing profession, so often perceived as "saintly," is not forgotten when the need for saints has disappeared.

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