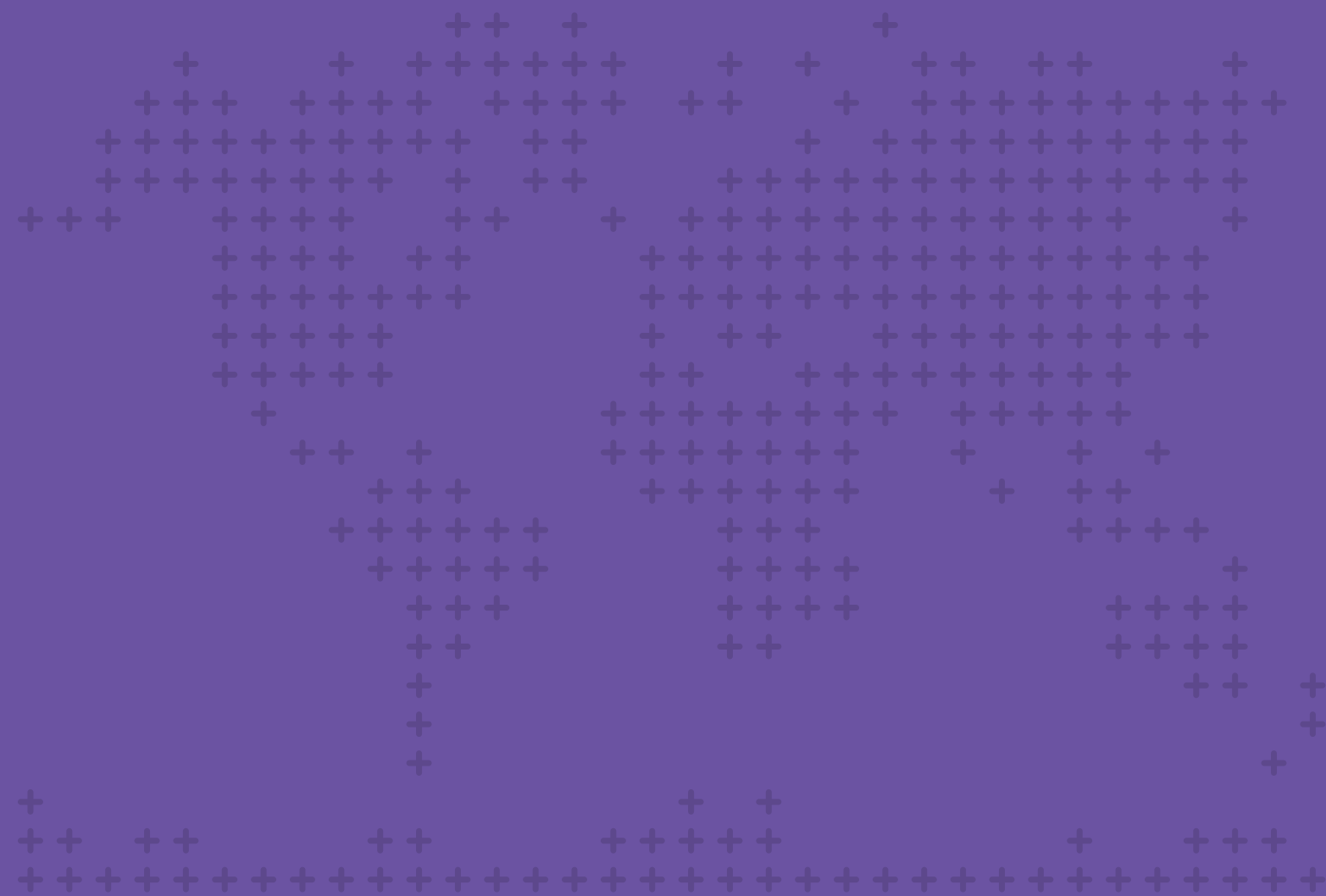


Global strategic directions for strengthening nursing and midwifery 2016–2020



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Table of Contents

Foreword	3
Acknowledgements	4
1. Introduction	5
2. Background	8
2.1 The availability, accessibility, and quality of the nursing and midwifery workforce.....	8
2.2 The vital role of the nursing and midwifery workforce in building the resilience of communities to respond to diverse health conditions.....	8
2.3 Notable achievements have been made.....	9
2.4 The nursing and midwifery workforce: enablers for health service delivery priorities.....	10
2.5 Persistent nursing and midwifery challenges require innovative and transformative strategies and actions.....	10
3. Overview of the Global strategic directions for strengthening nursing and midwifery 2016-2020	12
3.1 Vision.....	13
3.2 Thematic areas.....	14
3.3 Guiding principles for implementation.....	14
3.4 Target audience.....	15

4. Thematic areas of the Global strategic directions for strengthening nursing and midwifery 2016–2020	16
Theme 1. Ensuring an educated, competent and motivated nursing and midwifery workforce within effective and responsive health systems at all levels and in different settings	16
Theme 2. Optimizing policy development, effective leadership, management and governance	18
Theme 3. Working together to maximize the capacities and potentials of nurses and midwives through intra- and interprofessional collaborative partnerships, education and continuing professional development	21
Theme 4. Mobilizing political will to invest in building effective evidence-based nursing and midwifery workforce development	22
5. Implementation of the Global strategic directions for strengthening nursing and midwifery 2016–2020	25
5.1 Country and regional needs	25
5.2 Areas for expedited action	25
5.3 Partnerships and alliances	26
5.4 Monitoring and evaluation	26
Annex 1. World Health Assembly resolutions on nursing and midwifery	35
Annex 2. WHA 64.7 Strengthening nursing and midwifery	36
Annex 3. Lists of participants: <i>Global strategic directions for strengthening nursing and midwifery 2016–2020</i> expert consultations	40
References	46

Foreword

For the first time in history, the population of people aged 60 years and older outnumber the population of children under 5 years. The implications of this shift, in terms of the demands and costs of health care are immense. Economic growth, modernization and urbanization have opened wide the entry point for the spread of unhealthy lifestyles. Instead of diseases vanishing as living conditions improve, socioeconomic progress is actually creating the conditions that favour the rise of noncommunicable diseases. Communicable diseases such as HIV/AIDS, tuberculosis, malaria and in most recent years Ebola and Zika virus disease, continue to devastate communities. Furthermore, addressing maternal and child health is a high priority for the international community that deserves the attention and services of nurses and midwives. Nurses respond to the health needs of people in all settings and throughout the lifespan. Their roles are critical in achieving global mandates such as universal health coverage and the Sustainable Development Goals. These mandates provide a challenge as well as an opportunity for making improvements in nursing and midwifery education and services in a comprehensive way that encompasses health promotion, disease prevention, treatment and rehabilitation.

Nursing and midwifery professions can transform the way health actions are organized and how health care is delivered if they are regulated and well supported. The services they offer can also provide a rallying point for inter- and intradisciplinary health actions, which is at the core of the WHO *Global strategic directions for strengthening nursing and midwifery 2016–2020*. The strategy takes into account the dynamism of global health – five years from now, WHO and partners will take stock and continue to align strategies with evidence-based global health trends. The application of community-responsive interventions within health systems that promote conducive work environments in line with the objectives of universal health coverage and the Sustainable Development Goals can help nurses and midwives to continue to make a difference through the provision of high-impact and low-cost interventions. Strengthening nursing and midwifery to support universal health coverage is a key imperative for improving the health of populations.



(Opening remarks at the Eighth Global Meeting of Heads of WHO Country Offices, 9 November 2015)

“Universal health coverage is one of the most powerful equalizers among all policy options. The declaration says it best: “To promote physical and mental health and well-being, and to extend life expectancy for all, we must achieve universal health coverage and access to quality health care. No one must be left behind.”

A handwritten signature in blue ink, appearing to read 'M. Lehan'.

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WHO is also grateful to the various WHO collaborating centres for nursing and midwifery development, the International Council of Nurses, the International Council of Midwives and other professional associations for their contributions towards the finalization of these *Global strategic directions for strengthening nursing and midwifery 2016–2020*.

Conceptualization and coordination of efforts was undertaken by Annette Mwansa Nkowane, Technical Officer, Nursing and Midwifery, Health Workforce Department, with technical support in the preparation and drafting of the global strategic directions on nursing and midwifery from Stephanie Ferguson, independent consultant, under the leadership of Jim Campbell, Director, Health Workforce Department.

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1. Introduction

In May 2000, the Fifty-fourth World Health Assembly, by resolution WHA54.12 on Strengthening nursing and midwifery, requested the Director-General to “prepare rapidly a plan of action for strengthening nursing and midwifery”. As a follow-up to that, the first strategic directions for nursing and midwifery were developed in 2002 (1) and updated in 2011 (2). Since then, several resolutions on strengthening nursing and midwifery services have been passed by the World Health Assembly, of which the most recent was resolution WHA64.7 of 2011 (see Annex 2). The strategic directions for nursing and midwifery provide policy-makers, practitioners and other stakeholders at every level of the health care system with a flexible framework for broad-based, collaborative action to enhance capacity for nursing and midwifery development.

The World Health Organization (WHO) continues to act on its commitment to strengthening nursing and midwifery and the health workforce in general. In May 2014, the Sixty-seventh World Health Assembly adopted resolution WHA67.24 on the Follow-up of the Recife Political Declaration on Human Resources for Health: renewed commitments towards universal health coverage. In paragraph 4(2) of that resolution, Member States requested the Director-General of WHO to develop and submit a new global strategy for human resources for health for consideration by the Sixty-ninth World Health Assembly. The Global Strategy on Human Resources for Health: Workforce 2030 (3) provides the foundation for the *Global strategic directions for strengthening nursing and midwifery 2016–2020*. The global strategic directions further provide the framework for strengthening nursing and midwifery services to help countries achieve universal health coverage and the Sustainable Development Goals.

The global strategic directions build on other strategic documents, such as the WHO 2013 guidelines on transforming and scaling up health professionals’ education and training (4), the Every Newborn action plan to end preventable deaths (5), the *State of the world’s midwifery report* (6), the Lancet series on midwifery (7), the Mental Health Action Plan 2013–2020 (8), the Global Strategy for Women’s, Children’s and Adolescents’ Health 2016–2030 (9), strategies towards ending preventable maternal mortality (10), the *World report on ageing and health* (11) and other global health mandates.

Although nurses and midwives constitute more than 50% of the health workforce in many countries, they are also affected by the challenge of shortages. Currently, it is estimated that of the 43.5 million health workers, 20.7 million are nurses and midwives. Nurses and midwives represent more than 50% of the

current (2013) shortfall, that is, 9 million out of 17.4 million. It is estimated that by 2030, the shortage of nurses and midwives will see a modest decline (to 7.6 million), but not in the African and Eastern Mediterranean Regions, where, if current trends continue, it is forecasted to actually worsen (3).

The Sustainable Development Goals and universal health coverage provide a challenge as well as an opportunity to continue to enhance the contribution of nursing and midwifery to their achievement. Currently the disease burden is increasing and becoming more complex, including with regard to noncommunicable, communicable, emerging and re-emerging diseases. As an example, it is projected that by 2050 the proportion of the world's population aged over 60 years will nearly double from 12% to 22%. Although older people are living in a healthier manner, old age is characterized by complex health states. In addition, noncommunicable diseases account for 38 million deaths each year (with 28 million of them in low- and middle-income countries), while cardiovascular diseases account for 17.5 million, cancers 8.2 million, respiratory diseases 4 million and diabetes 1.5 million (12).

Nurses and midwives are critical in the delivery of essential health services and are core in strengthening the health system. Acting both as individuals and as members and coordinators of interprofessional teams, nurses and midwives bring people-centred care closer to the communities where they are needed most, thereby helping improve health outcomes and the overall cost-effectiveness of services. They help to promote and maintain the health and wellness of an ageing population within the community, in line with the concept of active ageing. Meanwhile, at the other end of the spectrum, they can contribute to reductions in newborn, infant and maternal mortality in their role as skilled birth attendants and providers of neonatal care. They provide a wide range of services in hospital settings, from accident and emergency through to palliative care. And as key players in crisis and post-crisis situations, they contribute to the risk communication, response planning and multisectoral participation aspects of emergency preparedness programmes; and provide services ranging from trauma management to mental health and rehabilitation in post-emergency recovery (2).

The development of the *Global strategic directions for strengthening nursing and midwifery 2016–2020* followed an extensive consultative process. It included experts from all WHO regions, including leading academicians; educational institutions; government chief nursing and midwifery officers; policy-makers; WHO collaborating centres on nursing and midwifery; students; nongovernmental organizations and civil society; professional associations; and individual nurses and midwives. The process began with an expert consultation in Jordan in April 2015, followed by a second consultation in Geneva in September 2015, and a web-based global consultation from December 2015 to January 2016. The final expert consultation took place in Geneva in January 2016.

This update of the global strategic directions addresses nursing and midwifery workforce management, education, regulation, practice and research as a cross-cutting issue. It supports the development of enabling work environments, such as provision of adequate equipment and resources, decent working conditions and fair compensation to help enhance recruitment and retention. It also addresses leadership to ensure good strategic planning, implementation and evaluation.

2. Background

Since the first *Strategic directions for strengthening nursing and midwifery services 2002–2008*, there has been continued progress, as evidenced in the WHO nursing and midwifery progress reports, 2008–2012 and 2013–2015 (13, 14), the WHO 2015 Executive Board report on health workforce and services (15), and the Global Strategy on Human Resources for Health: Workforce 2030 (3). However, more still needs to be done. The issues highlighted in this chapter are closely linked to those of the Global Strategy on Human Resources for Health: Workforce 2030 – being the overall framework for health workforce development – and they constitute the basis for the development of the thematic areas of the *Global strategic directions for strengthening nursing and midwifery 2016–2020*.

2.1 The availability, accessibility, and quality of the nursing and midwifery workforce

There is a continued global shortage of human resources for health. The implementation of various global strategies, such as the Global Strategy for Women’s, Children’s and Adolescents’ Health 2016–2030 and the Mental Health Action Plan 2013–2020, will also depend to a large extent on the health workforce capacities of the nursing and midwifery workforce. The social determinants of health, including laws, policies, human rights, gender equity and governance mechanisms, can influence health risks and access to services. It is of utmost importance that the most marginalized and vulnerable populations have equitable access to quality care. The mere availability in numbers of the nursing and midwifery workforce is not sufficient. They must be equitably distributed, accessible by the population and possess the required competencies and motivation to deliver quality care that is appropriate and acceptable to the sociocultural contexts and expectations of the served population.

2.2 The vital role of the nursing and midwifery workforce in building the resilience of communities to respond to diverse health conditions

Universal health coverage can help to ensure the availability of a sufficient, well-educated and motivated nursing and midwifery workforce to provide the required health services. The universal health coverage approach aims to promote strong, efficient, well-run health systems through the promotion of people-centred care, while applying a broad range of interventions related to health promotion, disease

prevention, rehabilitation and palliative care (16). This implies provision of a continuum of health interventions throughout the life course. Therefore, the agenda of universal health coverage places the nursing and midwifery workforce at the core of the health response. It is therefore critical to invest in all areas of nursing and midwifery workforce development.

2.3 Notable achievements have been made

Although progress has been made, political will and other resources are still needed to sustain and expand efforts. Two WHO progress reports on nursing and midwifery (2008–2012 and 2013–2015) highlight some major achievements in nursing and midwifery development. A summary is presented in Table 1.

Table 1. Achievements in nursing and midwifery development

AREA	ACHIEVEMENTS
Primary health care and people-centred care	<p>Primary health care models of care led by nurses and midwives such as (community/family); women-centred care and the midwifery model of care (17, 18)</p> <p>Meeting the needs of people with disabilities, chronic conditions and noncommunicable diseases, including the needs of those in need of palliative care</p> <p>Core competencies in primary health care being assessed</p> <p>Capacity-building in areas of emergency and disaster responses, infection control, mental health and substance abuse</p> <p>More involvement in community health services</p> <p>Nurse-led multidisciplinary and multiprofessional team growth</p>
Workforce policy and practice	<p>National strategic plans for nursing and midwifery</p> <p>Greater commitment to regulation, legislation and accreditation</p> <p>Regulation, education and practice standards</p> <p>More commitment to establishing reliable nursing and midwifery databases</p>
Education	<p>Adoption of competency-based training at pre-service, continuous education and faculty levels</p> <p>Progress towards advanced nursing and midwifery practice</p>
Career development	<p>Gradual improvement in developing upgraded bridging programmes</p> <p>Leadership, skill development and presence in leadership positions</p>
Workforce management	<p>Agreements reached on needs to increase recruitment, retention, motivation and participation supported by global initiatives on retention</p> <p>Implementing better technology and communication platforms for nursing and midwifery workforce capacity-building and dissemination of good and best practices</p>
Partnerships	<p>Move towards strengthening collaboration with donor partners and nongovernmental organizations to address challenges</p> <p>Much more synergy among WHO collaborating centres for nursing and midwifery development and other stakeholders, such as the International Council of Nurses and the International Council of Midwives</p> <p>Enhanced faculty development and fellowships being awarded through North–North and North–South partnership collaboration</p>

Source: Adapted from WHO nursing and midwifery progress report 2008–2012, pages 117 and 118 (13).

In spite of these achievements there are major constraints, and more needs to be done at global, regional and country levels in order to address policy levers that shape education, the health labour market and the delivery of appropriate services.

2.4 The nursing and midwifery workforce: enablers for health service delivery priorities

There is demonstrable evidence substantiating the contribution of the nursing and midwifery workforce to health improvements, such as increased patient satisfaction, decrease in patient morbidity and mortality, stabilization of financial systems through decreased hospital readmissions, length of stay, and other hospital-related conditions, including hospital-acquired infections (19–22), which consequently contributes to patient well-being and safety. The utilization of the nursing and midwifery workforce is cost-effective. Nurses and midwives usually act as first responders to complex humanitarian crises and disasters; protectors and advocates for the community; and communicators and coordinators within teams. They provide services in a broad range of settings and needs, including in underserved populations. Nurses' interventions and informed decision-making in treatment of HIV, tuberculosis and other chronic conditions have stimulated improved patient adherence to treatment and reduced waiting times and the number of missed appointments at health care clinics (23–25). Studies also show that midwifery, including family planning and interventions for maternal and newborn health, could avert a total of 83% of all maternal deaths, stillbirths and neonatal deaths (26).

In addition, recent studies show that midwives can provide 87% of the needed essential care for women and newborns, when educated and regulated to international standards (27). It is also documented that educated, regulated and supported midwives are the most cost-effective suppliers of midwifery services. However, limitations in the scope of practice for midwives, and gaps in inclusion of maternal health indicators in national data systems, have impeded efforts to scale up programmes nationally (28). Substantial reductions in child deaths are possible, but only if intensified efforts to achieve intervention coverage are implemented successfully (29).

2.5 Persistent nursing and midwifery challenges require innovative and transformative strategies and actions

There is continued need for quality nursing and midwifery education and competent practitioners. Responding to unhealthy lifestyle choices, risk factor reduction and provision of a broad range of interventions in various practice conditions are critical in order to address natural and anthropogenic disasters and emerging and re-emerging infections and diseases, including noncommunicable diseases. Governments and relevant stakeholders should ensure that the nursing and midwifery workforce is

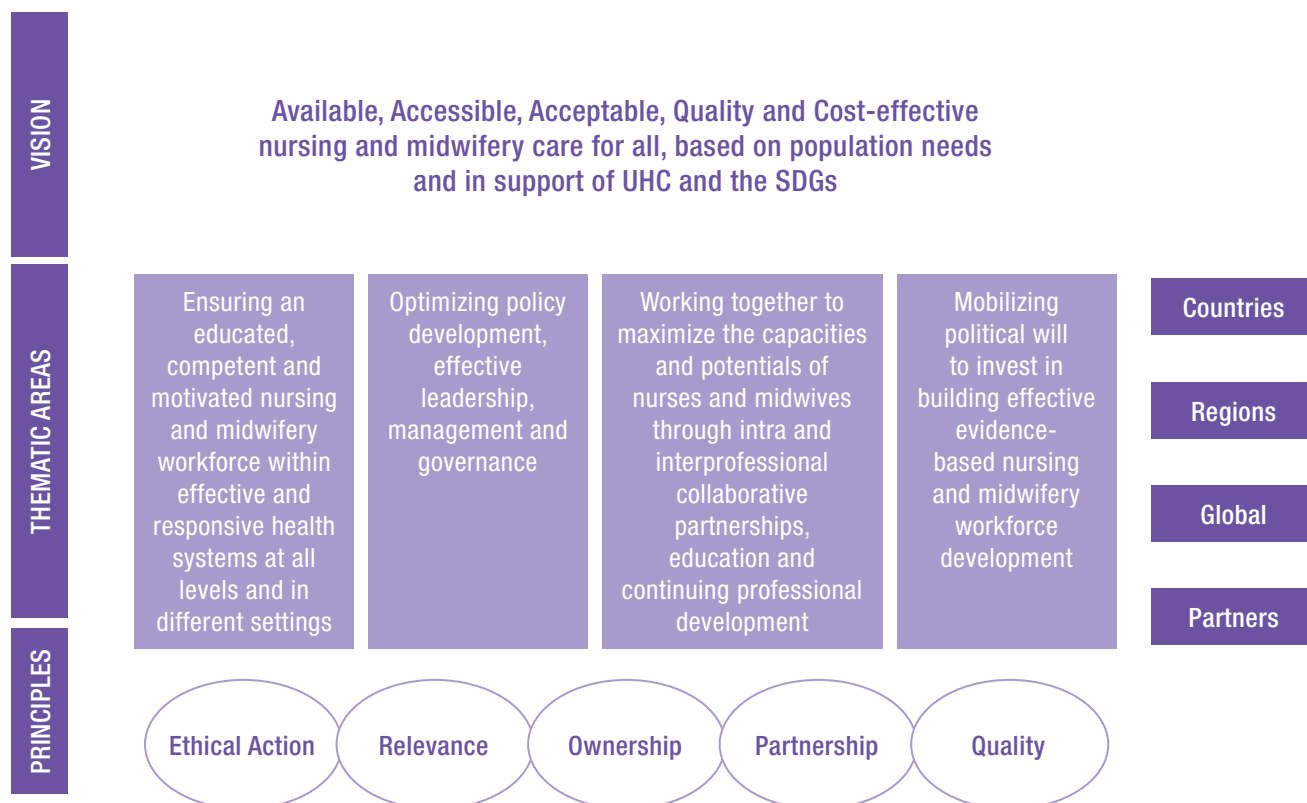
appropriately prepared and enabled to practise to their full scope. Nursing and midwifery education and practice are taking place in an era of progressive technological advancement, and its promotion is an important element for the future. Technology advances can support transformational outcomes of safe, integrated, high-quality, knowledge-driven, evidenced-based care and educational approaches. Future approaches should embrace interprofessional education and collaborative practice, as was noted in resolution WHA64.7 (2011) on Strengthening nursing and midwifery, for which the integration of increased availability and growing capabilities of information and communication technologies was an imperative. In responding to nursing and midwifery workforce challenges, robust leadership, governance and accountability are essential. Strategic planning based on collecting and monitoring data and indicators on country profiles can contribute to effective education, recruitment, deployment, retention (30) and management of the nursing and midwifery workforce. It is on this premise that the WHO *Global strategic directions for strengthening nursing and midwifery 2016–2020* are built.

3. Overview of the Global strategic directions for strengthening nursing and midwifery 2016–2020

The *Global strategic directions for strengthening nursing and midwifery 2016–2020* provide a framework for WHO and various key stakeholders to develop, implement and evaluate nursing and midwifery accomplishments to ensure available, accessible, acceptable, quality and safe nursing and midwifery interventions at global, regional and country levels. The global strategic directions enable all involved to demonstrate commitment, be accountable and report progress on essential elements. Optimizing leadership, strengthening accountability and governance, and mobilizing political will for the nursing and midwifery workforce is key for their effective contribution to the Sustainable Development Goals and universal health coverage. The global strategic directions embrace strategic partnerships with key stakeholders at all levels as essential for their implementation.

The *Global strategic directions for strengthening nursing and midwifery 2016–2020* present a vision, guiding principles, and four broad themes to guide growth of capabilities and maximize the contributions of the nursing and midwifery workforce to improve global health. The vision and the principles presented in this document reassert the Global Strategy on Human Resources for Health: Workforce 2030. Furthermore, the four themes reinforce the WHO Global Strategy on Human Resources for Health: Workforce 2030. Themes 1 and 2 are aligned to objectives 1 and 2 of the Global Strategy, while theme 3 is aligned to objective 3 of the Global Strategy, and theme 4 is aligned to objective 1. Figure 1 shows the conceptual framework for the *WHO Global strategic directions for strengthening nursing and midwifery 2016–2020*.

Figure 1. WHO Global strategic directions for strengthening nursing and midwifery 2016–2020: conceptual framework



3.1 Vision

Vision: Accessible, available, acceptable, quality and cost-effective nursing and midwifery care for all, based on population needs, in support of universal health coverage and the Sustainable Development Goals.

This vision is in line with the Global Strategy on Human Resources for Health: Workforce 2030, which seeks to accelerate progress towards universal health coverage and the United Nations Sustainable Development Goals by ensuring the universal accessibility, availability, acceptability, quality and cost-effectiveness of nursing and midwifery care for all, based on population needs.

3.2 Thematic areas

1. Ensuring an educated, competent and motivated nursing and midwifery workforce within effective and responsive health systems at all levels and in different settings.
2. Optimizing policy development, effective leadership, management and governance.
3. Working together to maximize the capacities and potentials of nurses and midwives through intra- and interprofessional collaborative partnerships, education and continuing professional development.
4. Mobilizing political will to invest in building effective evidence-based nursing and midwifery workforce development.

3.3 Guiding principles for implementation

The guiding principles of the WHO *Global strategic directions for strengthening nursing and midwifery 2016–2020* are in alignment with the previous versions and with the principles of the Global Strategy on Human Resources for Health: Workforce 2030. They are essential to guide individual and collaborative application of the five-year WHO strategic directions for nursing and midwifery in different contexts. They are as follows:

- **Ethical action.** Planning, providing and advocating safe, accountable high-quality health care services based on equity, integrity, fairness, and respectful practice, in the context of gender and human rights.
- **Relevance.** Developing nursing and midwifery education programmes, research, services and systems guided by health needs, evidence and strategic priorities.
- **Ownership.** Adopting a flexible approach that ensures effective leadership, management and capacity-building with active ownership, accountability mechanisms, engagement and involvement of all beneficiaries in all aspects of the collaboration.
- **Partnership.** Working respectfully together on common objectives, acting collaboratively with relevant stakeholders and supporting each other's efforts.
- **Quality.** Adopting mechanisms and standards based on evidence for best practice that promote relevant education and research, competent practice, effective professional regulation and dynamic leadership.

3.4 Target audience

This document has been developed primarily to provide a framework for nursing and midwifery interventions within a WHO operational context. The main target audience includes WHO headquarters, regional and country offices, WHO collaborating centres for nursing and midwifery development and key partners. However, it is envisaged that this framework can be used by any entity working on nursing and midwifery. In addition to existing global strategies and mandates, the development of this document has considered current regional strategic directions to ensure relevancy and consistency in approach. These WHO *Global strategic directions for strengthening nursing and midwifery 2016–2020* are not exhaustive. Partners can implement activities on nursing and midwifery based on their mandates. The specific interventions indicated here are in support of the implementation of the WHO global strategic directions. It is envisaged that partnership collaboration will be cross-cutting.

4. Thematic areas of the Global strategic directions for strengthening nursing and midwifery 2016–2020

Theme 1. Ensuring an educated, competent and motivated nursing and midwifery workforce within effective and responsive health systems at all levels and in different settings

In order to ensure that health services are accessible, acceptable, available and of good quality, investing in the nursing and midwifery workforce is critical. The planning should involve not just increasing the quantity of providers but investment in improving their quality and relevance. This also entails ensuring enabling work environments, including through provision of adequate equipment and resources; decent working conditions; and fair compensation to help enhance recruitment and retention, as supported in the International Labour Organization (ILO) Nursing Personnel Convention, 1977 (No. 149), and the Nursing Personnel Recommendation, 1977 (No. 157) (31, 32). Quality care also requires up-to-date, evidence-based education, regulation and practice standards for nurses and midwives. Education includes continuing professional development to help maintain competence and advance practice.

Objective. To educate, recruit, deploy and retain the right number of nursing and midwifery workforce with appropriate competencies, equipped with the necessary resources and governed by professional regulation.

Strategy. Align investments and coordinate plans for development of nursing and midwifery in workforce management; in pre- and in-service education; in regulation; and in guaranteeing positive practice environments.

Strategic interventions

Countries

In alignment with national health priorities and workforce plans:

- Develop national costed plans for nursing and midwifery development with a minimum cycle of four to five years and an in-built monitoring and evaluation system.

- Integrate minimum data sets into national human resources for health observatories as a source of evidence-based decisions for the nursing and midwifery workforce.
- Develop and adopt, and support and monitor, quality management systems for nursing and midwifery services.
- Establish or strengthen and maintain national accreditation standards for nursing and midwifery education.
- Conduct a task analysis of the various cadres providing nursing and midwifery services to clarify their roles and scopes of practice.
- Review and implement competency-based curricula for educators, student nurses and student midwives, and preclinical teachers, taking into account quantity, quality and relevance of the nursing and midwifery workforce to meet local and national changing health needs.
- Develop and implement a plan on improving working conditions to ensure positive practice environments.

Regions

- Consolidate evidence or update data on educational institutions, regulatory bodies and regulatory information on licensing, registration and scopes of practice to establish a baseline for the nursing and midwifery workforce.
- Support the establishment of a minimum data set for the nursing and midwifery workforce for regional human resources for health observatories, where applicable.
- Provide technical support to countries to develop key service indicators to assess nursing and midwifery care.
- Develop or disseminate competency-based prototype curricula for nursing and midwifery programmes.
- Provide support to countries for the development and adoption of guidelines on establishing registration, licensure, education, and nursing and midwifery service delivery.
- Invest in the nursing and midwifery workforce, including through building capacity and ensuring appropriate skills and strategies for developing positive practice environments.

Global

- Develop a scope of practice framework for nursing and midwifery with the relevant skills mix to help achieve universal health coverage and the Sustainable Development Goals.

- Work with relevant WHO departments, teams and partners to ensure that data are generated based on minimum data sets and are compiled and disseminated on actual supply, geographical distribution (numbers, skills mix and competencies) and the population's demand for health services.
- Establish a template for assisting countries in developing and implementing national nursing and midwifery workforce plans through nursing and midwifery structures, for example directorates and units.
- Develop composite indicators for measuring the overall development of nursing and midwifery in each country.
- Work with relevant WHO departments, teams and partners to advocate the development of coordinated plans for investment in nursing and midwifery in line with the overall Global Strategy on Human Resources for Health: Workforce 2030.
- Disseminate the WHO nursing and midwifery educator competencies and promote their application at regional and country level for preparing nursing and midwifery educators or to guide the development of new programmes.

Partners

Work in collaboration with educational and practice institutions, including regulatory bodies and nursing and midwifery associations to:

- Implement, monitor and evaluate the quality of education and training programmes and practice in support of the WHO global strategic directions.
- Advocate and support the implementation of an enabling work environment.
- Coordinate investments to strengthen nursing and midwifery.
- Engage and support nursing and midwifery professional associations in planning and implementation of nursing and midwifery development.

Theme 2. Optimizing policy development, effective leadership, management and governance

Health systems are dynamic and are undergoing rapid changes globally. In the midst of these changes, nursing and midwifery leaders act as positive change agents in creating effective and responsive health systems as they engage in policy formulation across the different sectors, including education, workforce management, data collection and management, and research. Consequently, leaders will be required to plan and manage health services and education and regulatory systems, and to establish sound governance structures.

Objective. To engage and have active participation of nursing and midwifery leaders at every level of policy formulation, programme planning development and implementation, including evidence generation for the purpose of informed decision-making.

Strategy. Prepare nursing and midwifery leaders to meet the challenges of dynamic health systems by ensuring their competence in all aspects of nursing and midwifery development, including policy development, management and evidence generation, in order to improve the quality of education and nursing and midwifery service delivery.

Strategic interventions

Countries

In alignment with national health priorities and workforce plans:

- Advocate and set up mechanisms to raise the level of involvement of nurses and midwives in policy- and decision-making across the major sectors of service planning and management, education and management of human resources.
- Engage professional associations of nurses and midwives in policy discussions and development.
- Obtain resources, and where necessary use regional support from WHO and competent national bodies, to update or establish programmes for leadership preparation in all sectors of nursing and midwifery responsibility.
- Advocate effective systems of professional regulation, and strengthen and support the legislative authority to implement them.

- Establish and maintain robust systems for assessing the appropriate implementation of nationally agreed nursing and midwifery practice standards in health care delivery systems.
- Work to implement data collection and information systems to enable reliable reporting on the nursing and midwifery workforce status as relevant to local contexts, and to inform the national health workforce accounts.

Regions

- Promote and provide technical assistance to countries to support the establishment of a national nursing and midwifery department, headed by a nurse or midwife prepared in leadership and policy development roles.
- Review the relevance, adequacy and effectiveness of professional regulatory systems and offer technical assistance to reform or introduce regulation where it does not exist.
- Invest in training to enhance policy formulation and set up a mentoring system to prepare and support nurses and midwives that are currently holding policy development responsibilities, or are seeking to enter this field across various areas of nursing and midwifery.
- Provide support and guidance to adapt, develop and implement competency-based, action-orientated leadership preparation programmes that deal with service planning and delivery, policy formulation, strategic planning, human resources management, materials and financial management, and communication and advocacy.

Global

- Sustain the WHO Global Forum for Government Chief Nursing and Midwifery Officers to enhance the leadership capacity of the nursing and midwifery workforce in countries.
- Engage governments through the WHO Global Forum on Government Chief Nursing and Midwifery Officers to share the evidence in support of nursing and midwifery workforce development.
- Review and analyse models of current governments' chief nursing and midwifery roles and promote context-sensitive approaches to introduce or strengthen these roles.
- Develop a competency framework for leadership roles in the various aspects of nursing and midwifery.
- Identify the best practices for good governance and develop a tool to enable countries to evaluate the status of their nursing and midwifery governance systems.

Partners

- Seek participation from partners in monitoring and evaluating the implementation of the national nursing and midwifery development strategic plan.
- In collaboration with partners, promote and disseminate successes and lessons learned to all stakeholders, including politicians and key civil society groups, to strengthen perceptions of and raise commitment to supporting nursing and midwifery leadership development.

Theme 3. Working together to maximize the capacities and potentials of nurses and midwives through intra- and interprofessional collaborative partnerships, education and continuing professional development

The nursing and midwifery professions continue to evolve as their roles and responsibilities are influenced by local, national, regional and global challenges. These challenges require nurses and midwives to enhance professional collaboration within and outside the health sector. Education institutions along with regulatory and professional associations must also foster intra- and interprofessional learning in both their pre-service and continuing professional development programmes.

Objective. To optimize the nursing and midwifery impact on health systems at all levels through intra- and interprofessional collaboration and partnerships.

Strategy. Delineate, monitor and evaluate roles, functions and responsibilities of the nursing and midwifery workforce to advance collaborative education and practice.

Strategic interventions

Countries

In alignment with national health priorities and workforce plans:

- Formulate, strengthen and reinvigorate interdisciplinary and multisectoral technical working groups on interprofessional education and collaborative practice based on evidence.
- Strengthen collaborative practices at policy level to maximize effective nursing and midwifery input on health care.

- Develop or strengthen national nursing and midwifery strategies on interprofessional education and collaborative practice.
- Create interprofessional networks facilitated through web-based communities of practice to improve the quality of education, safety of practice and capacities of the nursing and midwifery workforce.

Regions

- Develop tools and provide technical support to improve partnerships and work environments among health services, departments of health, professional associations, research and educational institutions, and communities.
- Develop a nursing and midwifery implementation research agenda responding to the needs of the region in collaboration with WHO collaborating centres, government nursing and midwifery leaders, nursing and midwifery associations, regulators, and nursing and midwifery educational institutions.

Global

- Identify key partners, including service users, through the development of a database of experts to support and build the capacity of the nursing and midwifery education system and workforce to contribute to universal health coverage and the Sustainable Development Goals.
- Develop and disseminate an implementation toolkit for the WHO Framework for Action on Interprofessional Education and Collaborative Practice and other educational tools.
- Develop models for joint planning, implementation, monitoring and evaluation of sustainable nursing and midwifery education programmes and services, including continuing professional development.
- Disseminate models of effective and sustainable partnerships at global, regional and country levels.

Partners

- Implement multiyear plans for strengthening the capacity of nursing and midwifery education and services developed for each region, coordinated by WHO with partner organizations taking the lead on specific objectives and activities identified in the plan.
- Create leadership opportunities and positions for interprofessional education and collaboration for nurses and midwives and mechanisms for involvement in leadership roles.

Theme 4. Mobilizing political will to invest in building effective evidence-based nursing and midwifery workforce development

Building effective development of nursing and midwifery services and generating political commitment will require the involvement of governments, civil society and other allied professions to ensure relevant education and research and evidence-based safe practice. Regulating health care professional practice and setting standards for education and practice can help to improve nursing and midwifery educational practice. As responsible and accountable stakeholders in the delivery of care, nurses and midwives must engage with the forces that drive health care and become more committed in policy-making.

Objective. To establish structures that enable nurses and midwives to be empowered in order to achieve effective engagement and contribute to health policy development in order to increase nursing and midwifery workforce quantity and quality of service delivery.

Strategy. Build political support at the highest level of health systems and within civil society to ensure that the policies created to achieve universal health coverage and the Sustainable Development Goals encapsulate people-centred nursing and midwifery services.

Strategic interventions

Countries

In alignment with national health priorities and workforce plans:

- Formulate and implement nursing and midwifery policies that ensure integrated people-centred services that are in line with universal health coverage and the Sustainable Development Goals.
- Establish a multisectoral group to support the development of nursing and midwifery policies.
- Develop and support nursing and midwifery interventions that lead to improved access to health care services through the creation of links among the public, nongovernmental and private sectors to minimize barriers obstructing access to health services for vulnerable populations in urban, rural and remote areas.
- Update nursing and midwifery curricula and ensure that nursing and midwifery students acquire effective leadership skills, including assertiveness, negotiation and advocacy, and ability to develop and influence health policy.
- Develop and implement national advocacy plans targeting policy-makers and organizations.

Regions

- Engage ministries of health through regional committees to make commitments that support nursing and midwifery in their respective countries.
- Follow up on the commitments made by ministries of health in countries through periodic reviewing and reporting.

Global

- Disseminate existing global mandates and frameworks as reference materials for regional and country interventions for both health and non-health sectors.
- Develop frameworks for regional and country reporting on achievements in line with the global strategic directions.
- Support governments in strengthening the capacity of chief nursing and midwifery officers.
- Work with partners to develop advocacy and communication strategies and tools, for example media packs.
- Collaborate with relevant partners to compile existing evidence in workforce development, with emphasis on evidence specific to nurses and midwives.

Partners

- In support of the global strategic directions and with a view towards strengthening nursing and midwifery education and services, mobilize financial, human and material resources and increase awareness and advocacy on priority issues.
- Collaborate with WHO to assist governments in the implementation of global mandates and the resolutions of WHO regional committees.

5. Implementation of the Global strategic directions for strengthening nursing and midwifery 2016–2020

WHO will coordinate implementation efforts, with the support of key partners, to strengthen the capacity of nursing and midwifery frameworks in countries to deliver on the *Global strategic directions for strengthening nursing and midwifery 2016–2020*.

5.1 Country and regional needs

Using the four thematic areas as a guide, the global strategic directions provide an overall framework within which Member States, WHO and partners can prioritize and contextualize objectives and activities to address their specific health care needs and challenges. Countries must be encouraged to take the global strategic directions into account in their national health and human resources for health planning and policy-making. WHO headquarters and regional offices, in conjunction with partners, will provide technical support to countries in need as requested. WHO will strengthen the ability of regional institutions to support efforts to improve nursing and midwifery services at the country level and to lead joint efforts in specific areas of work within the operational framework of the global strategic directions.

5.2 Areas for expedited action

WHO will work with experts and stakeholders to prioritize areas of intervention in the four thematic areas that require immediate action based on needs. Priority areas for the implementation of the global strategic directions include:

- development of a global programme of work to support implementation of the global strategic directions;
- development of tools and templates for the collection, storage and update of baseline data for monitoring and evaluation of implementation of the global strategic directions;

- action plans to mobilize resources for the strengthening of nursing and midwifery services at every level of the health sector;
- regional policies for interprofessional collaboration in education and practice.

5.3 Partnerships and alliances

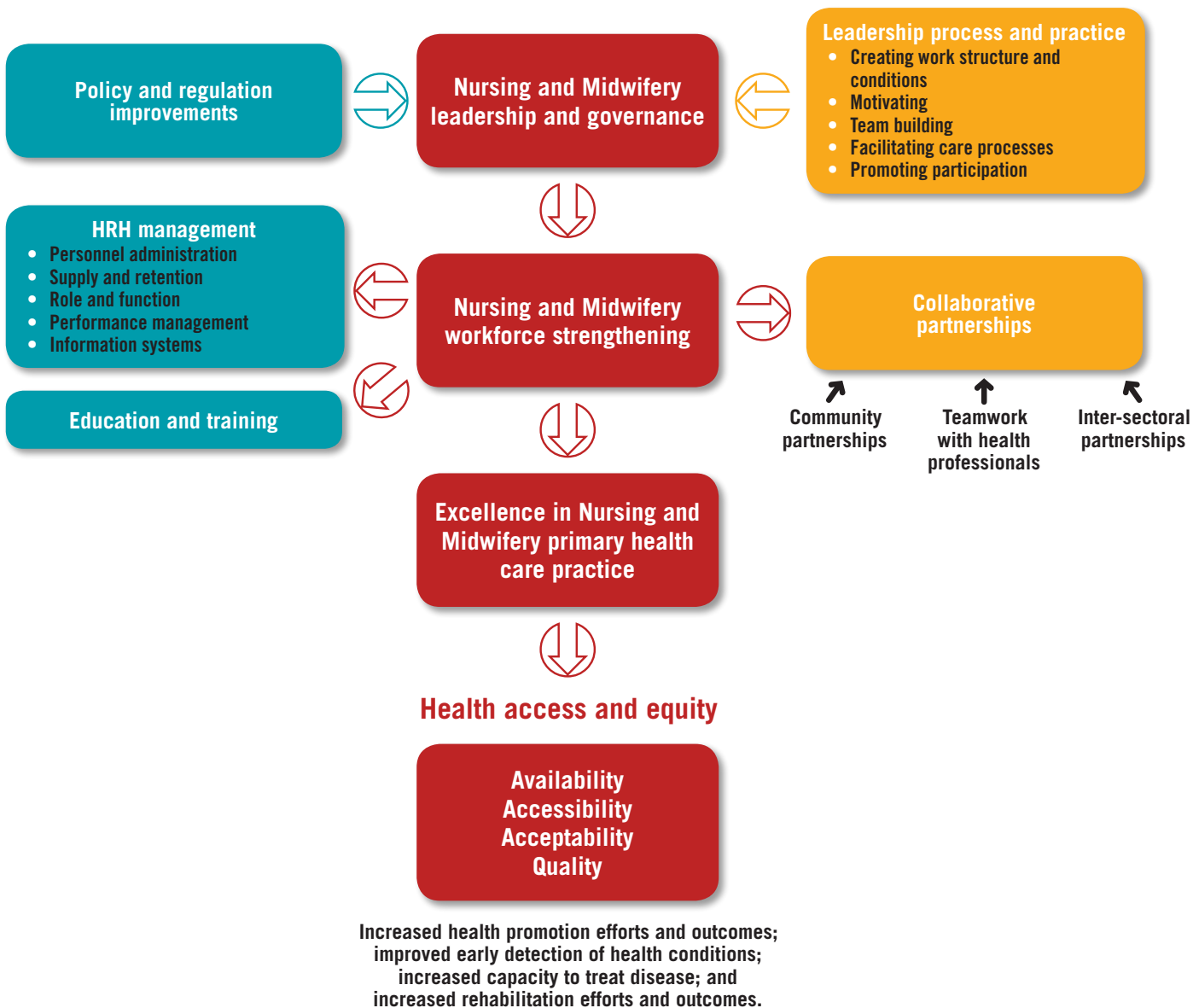
Through partnerships and alliances, WHO will ensure the successful implementation of the global strategic directions by promoting multisectoral, interprofessional teamwork among all stakeholders at the global, regional, national and local levels.

5.4 Monitoring and evaluation

The global strategic directions need a strong monitoring and evaluation framework to ensure effective assessment of their implementation. WHO, alongside its partners, will work with Member States to foster shared ownership and ensure a joint sense of responsibility and accountability towards achieving the vision of the global strategic directions. A strong monitoring and evaluation plan will also ensure that progress can be monitored and adjustments made to programmes where necessary. This plan will be incorporated into instruments such as the minimum data sets and the template reporting documents to be developed at respective levels while ensuring alignment with WHO agreed minimum data sets.

As part of on-going assessment, the nursing and midwifery leadership can review their contribution and workforce interventions and their impact on universal health access. The framework in Figure 2 helps to describe the link between nursing and midwifery, leadership and governance, workforce strengthening interventions, nursing and midwifery practice and universal access and health equity.

Figure 2: Conceptual framework of nursing and midwifery leadership.



Source: Dawson A.J, Nkowane A.M and Whelan A, 2015.

Theme 1. Ensuring an educated, competent and motivated nursing and midwifery workforce within effective and responsive health systems at all levels and in different settings

INTERVENTIONS	YEARS					INDICATORS
	2016	2017	2018	2019	2020	
<p>Countries</p> <p>In alignment with national health priorities and workforce plans:</p> <ol style="list-style-type: none"> 1. Develop national costed plans for nursing and midwifery development with a minimum cycle of four to five years and an in-built monitoring and evaluation system. 2. Integrate minimum data sets into national human resources for health observatories as a source of evidence-based decisions for the nursing and midwifery workforce. 3. Develop and adopt, and support and monitor, quality management systems for nursing and midwifery services. 4. Establish or strengthen and maintain national accreditation standards for nursing and midwifery education. 5. Conduct a task analysis of the various cadres providing nursing and midwifery services to clarify their roles and scopes of practice. 6. Review and implement competency-based curricula for educators, student nurses and student midwives, and preclinical teachers, taking into account quantity, quality and relevance of the nursing and midwifery workforce to meet local and national changing health needs. 7. Develop and implement a plan on improving working conditions to ensure positive practice environments. 	3, 6, 7	3, 4, 5, 6	1, 3, 5, 6	2, 3, 6	3, 6	<ol style="list-style-type: none"> 1. Number of countries implementing national costed plans for nursing and midwifery development based on minimum data sets 2. Number of countries with published minimum data sets 3. Number of countries with yearly reports on quality management outcomes 4. Number of countries with accreditation in place 5. Number of countries with completed task analysis 6. Number of countries with national curricula endorsed by regulatory body or institution 7. Number of countries implementing the plan on positive practice environment
<p>Regions</p> <ol style="list-style-type: none"> 1. Consolidate evidence or update data on educational institutions, regulatory bodies and regulatory information on licensing, registration and scopes of practice to establish a baseline for the nursing and midwifery workforce. 2. Support the establishment of a minimum data set for the nursing and midwifery workforce for regional human resources for health observatories, where applicable. 3. Provide technical support to countries to develop key service indicators to assess nursing and midwifery care. 4. Develop or disseminate competency-based prototype curricula for nursing and midwifery programmes. 5. Provide support to countries for development and adoption of guidelines on establishing registration, licensure, education and nursing and midwifery service delivery. 6. Invest in the nursing and midwifery workforce, including through building capacity and ensuring appropriate skills and strategies for developing positive practice environments. 	1, 2, 3, 6	2, 4	2, 4	2, 4	2, 5, 6	<ol style="list-style-type: none"> 1. Updated data on educational institutions, regulatory bodies and regulatory information on licensing, registration and scopes of practice 2. Number of countries with available minimum data sets by 2018 and by 2020 3. Number of countries with key performance indicators and service indicators by 2017 4. Competency-based curricula developed or disseminated 5. Number of countries supported with service indicators assessment 6. Number of countries with regulatory and accreditation mechanisms for nursing and midwifery by end of 2017

INTERVENTIONS	YEARS					INDICATORS
	2016	2017	2018	2019	2020	
Global 1. Develop a scope of practice framework for nursing and midwifery with the relevant skills mix to help achieve universal health coverage and the Sustainable Development Goals. 2. Work with relevant WHO departments, teams and partners to ensure that data are generated based on minimum data sets and are compiled and disseminated on actual supply, geographical distribution (numbers, skills mix and competencies) and the population's demand for health services. 3. Establish a template for assisting countries in developing and implementing national nursing and midwifery workforce plans through nursing and midwifery structures, for example directorates and units. 4. Develop composite indicators for measuring the overall development of nursing and midwifery in each country. 5. Work with relevant WHO departments, teams and partners to advocate the development of coordinated plans for investment in nursing and midwifery in line with the overall Global Strategy on Human Resources for Health: Workforce 2030. 6. Disseminate the WHO nursing and midwifery educator competencies and promote their application at regional and country level for preparing nursing and midwifery educators or to guide the development of new programmes.	1, 2, 3, 5, 6	2, 4	2, 4	2, 4	2, 5, 6	1. Number of countries with a framework for standard operating procedures on nursing and midwifery contribution to universal health coverage 2. Number of countries with minimum data sets 3. Number of countries with a national nursing and midwifery implementation template 4. Number of countries systematically collecting and using minimum data sets by 2018 and by 2020 5. Number of countries with coordinated national nursing and midwifery workforce plans 6. Composite indicators developed
Partners Work in collaboration with educational and practice institutions, including WHO collaborating centres, regulatory bodies and nursing and midwifery associations, to: 1. Implement, monitor and evaluate the quality of education and training programmes and practice in support of the WHO global strategic directions. 2. Advocate and support the implementation of an enabling work environment. 3. Coordinate investments to strengthen nursing and midwifery. 4. Engage and support nursing and midwifery professional associations in planning and implementation of nursing and midwifery development.	1, 2, 3, 4	1, 2, 3, 4	1, 2, 3, 4	1, 2, 3, 4	1, 2, 3, 4	1. Number of countries with evidence of appropriate support and partnership collaboration 2. Percentage of partners supporting regulatory bodies to monitor and evaluate training programmes in countries

Theme 2. Optimizing policy development, effective leadership, management and governance

INTERVENTIONS	YEARS					INDICATORS
	2016	2017	2018	2019	2020	
<p>Countries</p> <p>In alignment with national health priorities and workforce plans:</p> <ol style="list-style-type: none"> 1. Advocate and set up mechanisms to raise the level of involvement of nurses and midwives in policy- and decision-making across the major sectors of service planning and management, education and management of human resources. 2. Engage professional associations of nurses and midwives in policy discussions and development. 3. Obtain resources, and where necessary, use regional support from WHO and competent national bodies, to update or establish programmes for leadership preparation in all sectors of nursing and midwifery responsibility. 4. Advocate effective systems of professional regulation, and strengthen and support the legislative authority to implement them. 5. Establish and maintain robust systems for assessing the appropriate implementation of nationally agreed nursing and midwifery practice standards in health care delivery systems. 6. Work to implement data collection and information systems to enable reliable reporting on the nursing and midwifery workforce status as relevant to local contexts, and to inform the national health workforce accounts. 	1, 2, 3	1, 2, 3, 4, 5, 6	1, 2, 4, 5, 6	1, 2, 4, 5, 6	1, 2, 4, 5, 6	<ol style="list-style-type: none"> 1. Number of nurses and midwives involved in leadership and decision-making at all levels of the health care system 2. Number of countries that have an operationalized national nursing and midwifery strategic plan 3. Number of countries that have specific programmes for preparing nurses and midwives for leadership roles 4. Number of countries that have implemented national standards for education, practice and nursing and midwifery services 5. Number of countries that have reviewed and revised professional regulations 6. Availability and status of information systems (e.g. for education, workforce, regulation)
<p>Regions</p> <ol style="list-style-type: none"> 1. Promote and provide technical assistance to countries to support the establishment of a national nursing and midwifery department, headed by a nurse or midwife prepared in leadership and policy development roles. 2. Review the relevance, adequacy and effectiveness of professional regulatory systems and offer technical assistance to reform or introduce regulation where it does not exist. 3. Invest in training to enhance policy formulation and set up a mentoring system to prepare and support nurses and midwives that are currently holding policy development responsibilities, or are seeking to enter this field across various areas of nursing and midwifery. 4. Provide support and guidance to adapt, develop and implement competency-based, action-orientated leadership preparation programmes that deal with service planning and delivery, policy formulation, strategic planning, human resources management, materials and financial management, and communication and advocacy. 	2, 3	1, 2, 3, 4	1, 2, 3, 4	1, 2, 3, 4	1, 2, 3, 4	<ol style="list-style-type: none"> 1. Yearly report of regional data and activities on areas related to global strategic directions 2. Number of programmes and countries using the model and guidance for leadership education and development offered either at country or regional level 3. Evidence of countries adopting and adapting a mentoring approach to support nurses and midwives already involved in policy development or seeking to enter this field 4. Number of countries with a current and approved national strategic plan for nursing and midwifery development

INTERVENTIONS	YEARS					INDICATORS
	2016	2017	2018	2019	2020	
<p>Global</p> <ol style="list-style-type: none"> 1. Sustain the WHO Global Forum for Government Chief Nursing and Midwifery Officers to enhance the leadership capacity of the nursing and midwifery workforce in countries. 2. Engage governments through the WHO Global Forum on Government Chief Nursing and Midwifery Officers to share the evidence in support of nursing and midwifery workforce development. 3. Review and analyse models of current governments' chief nursing and midwifery roles and promote context-sensitive approaches to introduce or strengthen these roles. 4. Develop a competency framework for leadership roles in the various aspects of nursing and midwifery. 5. Identify the best practices for good governance and develop a tool to enable countries to evaluate the status of their nursing and midwifery governance systems. 	1, 2, 3, 4, 5	1, 2, 3, 5	1, 5	5	1, 5	<ol style="list-style-type: none"> 1. Number of countries participating in global forums for leadership development 2. Number of countries with documented evidence of increased nursing and midwifery leadership capacity 3. Number of countries reporting the creation of new structures within the ministries of health headed by a nursing or midwifery professional, carrying out a major role in policy formulation both for nursing and midwifery and for health services in general, undertaking and implementing national nursing and midwifery strategic plans, and providing informed advice pertaining to nursing and midwifery to other policy- and decision-makers 4. Leadership competencies framework is available and used at regional and national levels to revise and develop leadership roles through guiding curriculum development and leadership programme implementation, and to revise and develop leadership roles and job descriptions 5. A strategic directions for nursing and midwifery reporting framework exists and has been tested
<p>Partners</p> <ol style="list-style-type: none"> 1. Seek participation from partners in monitoring and evaluating the implementation of the national nursing and midwifery development strategic plan. 2. In collaboration with partners, promote and disseminate successes and lessons learned to all stakeholders, including politicians and key civil society groups, to strengthen perceptions of and raise commitment to supporting nursing and midwifery leadership development. 	1, 2,	1, 2,	1, 2,	1, 2,	1, 2,	<ol style="list-style-type: none"> 1. Number of countries with programmes demonstrating collaboration with partners 2. Percentage of partners involved in dissemination of information on the activities and results of the collaboration

Theme 3. Working together to maximize the capacities and potentials of nurses and midwives through intra- and interprofessional collaborative partnerships, education and continuing professional development

INTERVENTIONS	YEARS					INDICATORS
	2016	2017	2018	2019	2020	
<p>Countries</p> <p>In alignment with national health priorities and workforce plans:</p> <ol style="list-style-type: none"> 1. Formulate, strengthen and reinvigorate interdisciplinary and multisectoral technical working groups on interprofessional education and collaborative practice based on evidence. 2. Strengthen collaborative practices at policy level to maximize effective nursing and midwifery input on health care. 3. Develop or strengthen national nursing and midwifery strategies on interprofessional education and collaborative practice. 4. Create interprofessional networks facilitated through web-based communities of practice to improve the quality of education, safety of practice and capacities of the nursing and midwifery workforce. 			1, 2, 3, 4			<ol style="list-style-type: none"> 1. Number of countries that have implemented tools to strengthen technical working groups 2. Number of countries that have models of collaborative practices at policy level reported to regional offices 3. Number of countries that have current strategies on interprofessional education and collaborative practices reported to regional offices 4. Number of countries that have interprofessional web-based communities of practice
<p>Regions</p> <ol style="list-style-type: none"> 1. Develop tools and provide technical support to improve partnerships and work environments among health services, departments of health, professional associations, research and educational institutions, and communities. 2. Develop a nursing and midwifery implementation research agenda responding to the needs of the region in collaboration with WHO collaborating centres, government nursing and midwifery leaders, nursing and midwifery associations, regulators, and nursing and midwifery educational institutions. 			1, 2			<ol style="list-style-type: none"> 1. Number of tools for improved partnership developed 2. Number of technical supports provided to countries for partnership development 3. Implementation research agenda developed and reported upon
<p>Global</p> <ol style="list-style-type: none"> 1. Identify key partners, including service users, through the development of a database of experts to support and build the capacity of the nursing and midwifery education system and workforce to contribute to universal health coverage and the Sustainable Development Goals. 2. Develop and disseminate an implementation toolkit for the WHO Framework for Action on Interprofessional Education and Collaborative Practice and other educational tools. 3. Develop models for joint planning, implementation, monitoring and evaluation of sustainable nursing and midwifery education programmes and services, including continuing professional development. 4. Disseminate models of effective and sustainable partnerships at global, regional and country levels. 	1, 2,	1, 2,		3	3	<ol style="list-style-type: none"> 1. Database for all regional offices 2. Number of toolkits developed 3. Number of guidelines and models developed 4. Number of models disseminated
<p>Partners</p> <ol style="list-style-type: none"> 1. Implement multiyear plans for strengthening the capacity of nursing and midwifery education and services developed for each region, coordinated by WHO with partner organizations taking the lead on specific objectives and activities identified in the plan. 2. Create leadership opportunities and positions for interprofessional education and collaboration for nurses and midwives and mechanisms for involvement in leadership roles. 	1, 2,	1	1	1	1	<ol style="list-style-type: none"> 1. Percentage of partners implementing multiyear plans for strengthening country nursing and midwifery education and service capacities 2. Reports on the number and types of leadership opportunities for interprofessional education and collaboration created

Theme 4. Mobilizing political will to invest in building effective evidence-based nursing and midwifery workforce development

	INTERVENTIONS	YEARS					INDICATORS
		2016	2017	2018	2019	2020	
Countries	<p>In alignment with national health priorities and workforce plans:</p> <ol style="list-style-type: none"> 1. Formulate and implement nursing and midwifery policies that ensure integrated people-centred services that are in line with universal health coverage and the Sustainable Development Goals. 2. Establish a multisectoral group to support the development of nursing and midwifery policies. 3. Develop and support nursing and midwifery interventions that lead to improved access to health care services through the creation of links among the public, nongovernmental and private sectors to minimize barriers obstructing access to health services for vulnerable populations in urban, rural and remote areas. 4. Update nursing and midwifery curricula and ensure that nursing and midwifery students acquire effective leadership skills, including assertiveness, negotiation and advocacy, and ability to develop and influence health policy. 5. Develop and implement national advocacy plans targeting policy-makers and organizations. 		1, 2, 3	3, 4, 5	3, 4, 5	3, 4	<ol style="list-style-type: none"> 1. Number of countries implementing people-centred nursing and midwifery models, policies and interventions within the vision for universal health coverage and the Sustainable Development Goals 2. Number of countries having set up a multisectoral group to support the planning and implementation of nursing and midwifery policies and interventions 3. Percentage increase in the number of clients in rural and remote areas satisfied with access to health care and with nursing and midwifery services after one year of intervention 4. Number of countries with updated nursing and midwifery education curricula reflecting leadership training content 5. Number of nursing and midwifery projects supported by policy-makers and organizations
Regions	<ol style="list-style-type: none"> 1. Engage ministries of health through regional committees to make commitments that support nursing and midwifery in their respective countries. 2. Follow up on the commitments made by ministries of health in countries through periodic reviewing and reporting. 	1, 2	2	2	2	2	<ol style="list-style-type: none"> 1. Areas of commitment made by the ministry of health during regional committee meetings that support nursing and midwifery 2. Number of commitments achieved at country level by the next regional committee meeting

INTERVENTIONS	YEARS					INDICATORS
	2016	2017	2018	2019	2020	
Global 1. Disseminate existing global mandates and frameworks as reference materials for regional and country interventions for both health and non-health sectors. 2. Develop frameworks for regional and country reporting on achievements in line with the global strategic directions. 3. Support governments in strengthening the capacity of chief nursing and midwifery officers. 4. Work with partners to develop advocacy and communication strategies and tools, for example media packs. 5. Collaborate with relevant partners to compile existing evidence in workforce development, with emphasis on evidence specific to nurses and midwives.	1, 2, 4	3, 4, 5	4, 5	4	4	1. Effective coordination mechanism in place to ensure the regular dissemination of health global mandates and frameworks 2. Reporting on achievements in line with the global strategic directions carried out at regional and country levels based on the global framework 3. Number of countries that have trained their chief nursing and midwifery officers 4. Number of multimedia and publicity initiatives recorded 5. Number of partners supporting country data compilation activities
Partners 1. In support of the global strategic directions and with a view towards strengthening nursing and midwifery education and services, mobilize financial, human and material resources and increase awareness and advocacy on priority issues. 2. Collaborate with WHO to assist governments in the implementation of global mandates and the resolutions of WHO regional committees.	1, 2,	1, 2	2	2	2	1. Number of partners carrying out advocacy measures to help mobilize financial, human and material resources to support government efforts 2. Number of partners that have an active engagement framework with government representatives

Annex 1. World Health Assembly resolutions on nursing and midwifery

YEAR	RESOLUTION
2011	WHA64.7: Strengthening nursing and midwifery
2006	WHA59.27: Strengthening nursing and midwifery
2001	WHA54.12: Strengthening nursing and midwifery
1996	WHA49.1: Strengthening nursing and midwifery
1992	WHA45.5: Strengthening nursing and midwifery in support of strategies for health for all
1989	WHA42.27: Strengthening nursing/midwifery in support of the strategy for health for all
1983	WHA36.11: The role of nursing/midwifery personnel in the Strategy for Health for All
1977	WHA30.48: The role of nursing/midwifery personnel in primary health care teams
1950	WHA3.67: Increasing and improving the supply and use of nurses
1949	WHA2.77: Expert Committee on Nursing

Annex 2. WHA 64.7 Strengthening nursing and midwifery

Agenda item 13.4, 24 May 2011

Strengthening nursing and midwifery

The Sixty-fourth World Health Assembly,

Having considered the reports on health system strengthening;¹

Recognizing the need to build sustainable national health systems and to strengthen national capacities to achieve the goal of reduced health inequities;

Recognizing the crucial contribution of the nursing and midwifery professions to strengthening health systems, to increasing access to comprehensive health services for the people they serve, and to the efforts to achieve the internationally agreed health-related development goals, including the Millennium Development Goals and those of the World Health Organization's programmes;

Concerned at the continuing shortage and maldistribution of nurses and midwives in many countries and the impact of this on health care and more widely;

Acknowledging resolution WHA62.12 on primary health care, including health system strengthening, which called, inter alia, for the renewal and strengthening of primary health care, as well as urging Member States to train and retain adequate numbers of health workers, with appropriate skill mix, including primary care nurses and midwives, in order to redress current shortages of health workers to respond effectively to people's health needs;

Acknowledging the ongoing WHO initiatives on the scaling up of transformative health professional education and training in order to increase the workforce numbers and the relevant skill mix in response to the country health needs and health systems context;

¹ Documents A64/12 and A64/13.

Recognizing the global policy recommendations by WHO on increasing access to health workers in remote and rural areas through improved retention² as an evidence platform for developing effective country policies for rural retention of nursing and midwifery personnel;

Taking note of the WHO Global Code of Practice on the International Recruitment of Health Personnel;³

Reaffirming the call for governments and civil society to strengthen capacity to address the urgent need for skilled health workers, particularly midwives, made in the WHO, UNFPA, UNICEF and World Bank Joint Statement on Maternal and Newborn Health;

Noting the importance of multidisciplinary involvement, including that of nurses and midwives, in high-quality research that grounds health and health systems policy in the best scientific knowledge and evidence, as elaborated in WHO's strategy on research for health, endorsed in resolution WHA63.21;

Noting that nurses and midwives form the majority of the workforce in many countries' health systems, and recognizing that the provision of knowledge-based and skilled health services maximizes the physical, psychological, emotional and social well-being of individuals, families and societies;

Recognizing the fragmentation of health systems, the shortage of human resources for health and the need to improve collaboration in education and practice, and primary health care services;

Having considered the reports on progress in the implementation of resolution WHA59.27 on strengthening nursing and midwifery;⁴

Mindful of previous resolutions to strengthen nursing and midwifery (WHA42.27, WHA45.5, WHA47.9, WHA48.8, WHA49.1, WHA54.12 and WHA59.27) and the new strategic directions for nursing and midwifery services in place for the period 2011–2015;⁵

2 *Increasing access to health workers in remote and rural areas through improved retention: global policy recommendations.* Geneva, World Health Organization, 2010.

3 Adopted in resolution WHA63.16.

4 See documents A61/17 and A63/27.

5 Document WHO/HRH/HPN/10.1.

Recognizing the need to improve the education of nurses and midwives,

1. URGES Member States to translate into action their commitment to strengthening nursing and midwifery by:
 - (1) developing targets and action plans for the development of nursing and midwifery, as an integral part of national or subnational health plans, that are reviewed regularly in order to respond to population-health needs and health system priorities as appropriate;
 - (2) forging strong, interdisciplinary health teams to address health and health system priorities, recognizing the distinct contribution of nursing and midwifery knowledge and expertise;
 - (3) participating in the ongoing work of WHO's initiatives on scaling up transformative education and training in nursing and midwifery in order to increase the workforce numbers and the mix of skills that respond to the country's health needs and are appropriate to the health system context;
 - (4) collaborating within their regions and with the nursing and midwifery professions in the strengthening of national or subnational legislation and regulatory processes that govern those professions, including the development of competencies for the educational and technical preparation of nurses and midwives, and systems for sustaining those competencies; and giving consideration to the development of the continuum of education that is necessary for attaining the required level of expertise of nurse and midwifery researchers, educators and administrators;
 - (5) strengthening the data set on nurses and midwives as an integral part of the national and subnational health workforce information systems, and maximizing use of this information for evidence-based policy decisions;
 - (6) harnessing the knowledge and expertise of nursing and midwifery researchers in order to contribute evidence for health system innovation and effectiveness;
 - (7) engaging actively the expertise of nurses and midwives in the planning, development, implementation and evaluation of health and health system policy and programming;
 - (8) implementing strategies for enhancement of interprofessional education and collaborative practice including community health nursing services as part of people-centred care;
 - (9) including nurses and midwives in the development and planning of human resource programmes that support incentives for recruitment, retention and strategies for improving workforce issues, such as remuneration, conditions of employment, career development and advancement, and development of positive work environments;

- (10) promoting the establishment of national and subnational mechanisms in order to develop and support the effective interventions proposed in the global policy recommendations on increasing access to health workers in remote and rural areas through improved retention;⁶
- (11) implementing the WHO Global Code of Practice on the International Recruitment of Health Personnel, given the national impact of the loss of trained nursing staff, as appropriate at national and local level;

2. REQUESTS the Director-General:

- (1) to strengthen WHO's capacity for development and implementation of effective nursing and midwifery policies and programmes through continued investment and appointment of professional nurses and midwives to specialist posts in the Secretariat both at headquarters and in regions;
- (2) to engage actively the knowledge and expertise of the Global Advisory Group on Nursing and Midwifery in key policies and programmes that pertain to health systems, the social determinants of health, human resources for health and the Millennium Development Goals;
- (3) to provide technical support and evidence for the development and implementation of policies, strategies and programmes on interprofessional education and collaborative practice, and on community health nursing services;
- (4) to provide support to Member States in optimizing the contributions of nursing and midwifery to implementing national health policies and achieving the internationally agreed health-related development goals, including those contained in the Millennium Declaration;
- (5) to encourage the involvement of nurses and midwives in the integrated planning of human resources for health, particularly with respect to strategies for maintaining adequate numbers of competent nurses and midwives;
- (6) to report on progress in implementing this resolution to the World Health Assembly through the Executive Board, in a manner integrated with the reporting on resolution WHA63.16 on the WHO Global Code of Practice on the International Recruitment of Health Personnel.

Tenth plenary meeting, 24 May 2011

A64/VR/10

⁶ *Increasing access to health workers in remote and rural areas through improved retention: global policy recommendations.* Geneva, World Health Organization, 2010.

Annex 3. Lists of participants: Global strategic directions for strengthening nursing and midwifery 2016–2020 expert consultations

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