

# Nurse Leadership in the Fight for Health Equity: The Changing Role

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## Introduction

The World Health Organization proclaimed 2020 the International Year of the Nurse and the Midwife to mark the anniversary of Florence Nightingale's birth and the start of the nursing year (WHO). The most deadly and life-changing worldwide pandemic in recent history marked its conclusion. Over 600,000 people have died from the Sars-CoV-2 virus, which has infected over 33 million people globally. A public outcry to address long-standing societal imbalances that have contributed to the current predicament has been sparked by devastating disparities in COVID-19 infection and outcomes among socioeconomically marginalised groups. In light of this, it is only appropriate that the National Academies of Science, Engineering, and Medicine (NAM) and the Robert Wood Johnson Foundation recently released their joint report, "The Future of Nursing 2020–2030: Charting a Path to Achieve Health Equity," outlining the critical part nurses are called to play in advancing health equity for all. "The absence of systematic differences in health (or in the major social determinants of health) between social groups who have varying levels of underlying social advantage/disadvantage," is the definition of health equity. It implies that everyone has an equal and just chance to pursue optimal health, which calls for the eradication of barriers to health like deprivation and discrimination, as well as the effects of these [1].

Nurses are called upon to assist lead the charge as the country undergoes a renewed commitment to ensuring health equity and combating the societal injustices, such as systemic racism, that lead to health disparities. Nearly 4 million registered nurses make up the largest health care profession in the country, and as such, nurses have a lot to offer as leaders in the battle for health equity. As such, nurse leaders must have a place at the table where decisions are made. On the front lines of the epidemic, nurses have been essential as bedside carers, scientists, advocates, and leaders in the medical field. However, in spite of the critical responsibilities played by nurses and their efforts to helping our country survives this unprecedented calamity [2].

According to the most current Gallup poll, Americans have ranked nursing as the profession with the highest ethical and honest standards for the 19th consecutive year. With the exception of one year, nurses have been the top-ranking profession since the Gallup list's establishment in 1999. The most recent 2020 poll, which revealed record-breaking statistics, found that 89% of Americans assessed nurses' honesty and ethical standards as "high" or "very high." Nurse Leaders have a responsibility to be good custodians of the public's faith in nursing by acting as healers as well as advocates. By virtue of our profession, nurses are expected to be advocates, and public health nursing practises include advocacy. In order to continue advising practising

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public health nurses, the Association of Public Health Nurses (APHN) formed a Health Equity and Social Justice Committee with the mission of updating the Association's position on these crucial principles. In order to achieve optimal health and well-being for all populations, APHN defines health equity as "an ideal state marked by fairness and the elimination of disparities in health status across populations by race, ethnicity, gender, gender identity, geography, disability, religion, sexual [orientation], and mental status." Public health nurse leaders frequently find themselves in positions where they are required to engage policy makers about communities, including the significance of language and culture, in a way that sparks strategic mobilisation to improve people's health condition [3].

The crucial task of preparing tomorrow's nurses and nurse researchers to provide care and conduct research with a variety of, sometimes marginalised or vulnerable populations falls to nursing professors. Only 1.9% of registered nurses in the country had a PhD degree as their highest level of education in 2018, despite the fact that 19.3% of nurses had completed graduate school training and the current demand considerably outweighs the supply. According to the American Association of Colleges of Nursing report on 2019–2020 Enrolment and Graduations in Baccalaureate and Graduate Programs in Nursing, nursing schools in the United States (U.S.) rejected over 80,000 qualified applications from baccalaureate and graduate nursing programmes in 2019 in part due to a lack of faculty, and the majority of respondents identified faculty shortages as the top concern. Nursing education saw a refocusing of efforts more than ten years ago, moving from training alone to education that includes health disparities and SDOH. Given the well-known and essential roles that racism, stereotyping, segregation, and classism play in achieving health equity and SDOH, nurse educators must address these issues in nursing education by emphasising the intricate connections between the institutional, social, political, interpersonal, and individual factors that affect health. In order to actualize the role of nursing in improving health justice, it will take sustained improvement and future initiatives, including strategies to foster cultural humility and community-based participatory methodologies. Nurse educators need to promote, expand, and support these opportunities in order to achieve this [4].

## Description

Unquestionably, nurse leaders have a chance to show the way toward attaining health equity for all. Nurse leaders can take practical actions to help the country get closer to this objective, regardless of the precise leadership role(s) they hold. For instance, nurse scientists can make sure that SDOH are not only included in the EHR but also that the data is used to enhance the quality of care and the results of that care. Nurse innovators can uncover and create novel approaches to address health care inequities in clinical settings and communities by using patient data and a comprehension of the patient experience. To guarantee that nursing's voice is heard and diverse viewpoints are conveyed, nurse leaders must participate actively in local and national legislative conversations in their capacity as advocates [5].

## Conclusion

The opportunity for nurse leaders to set the pace for achieving health equity for everyone is apparent. Regardless of the precise leadership position(s), nurse leaders can act in a concrete way to advance the country towards this

objective. For instance, nurse scientists can make sure that SDOH are present in the EHR and that the data is used to enhance care and care outcomes. Nurse innovators can find and create fresh approaches to deal with health care inequities in communities as well as clinical settings by using patient data and an understanding of the patient experience. Nurse leaders must participate in local and national legislative conversations as advocates to make sure that nursing's voice is heard and that diverse viewpoints are shared.

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## Acknowledgement

None.

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## Conflict of Interest

None.

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