

Editorial

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The COVID-19 pandemic has led to a dramatic loss of human life worldwide and presents an unprecedented challenge to public health, food systems and the world of work. The economic and social disruption caused by the pandemic is devastating: tens of millions of people are at risk of falling into extreme poverty, while the number of undernourished people, currently estimated at nearly 690 million, could increase by up to 132 million by the end of the year. Millions of enterprises face an existential threat. Nearly half of the world's 3.3 billion global workforce are at risk of losing their livelihoods. Informal economy workers are particularly vulnerable because the majority lack social protection and access to quality health care and have lost access to productive assets. Without the means to earn an income during lockdowns, many are unable to feed themselves and their families. For most, no income means no food, or, at best, less food and less nutritious food. The COVID-19 outbreak has placed unprecedented demands on our health system.

Our health facilities and workforce are currently inundated by a plethora of activities related to controlling the pandemic. As this pandemic has affected all the areas globally, India is no different. The infection prevention and control considerations are for healthcare facilities providing obstetric care for pregnant patients with confirmed novel coronavirus disease (COVID-19) or pregnant Persons Under Investigation (PUI) in obstetric healthcare settings includes obstetrical triage, labour and delivery, recovery and inpatient postpartum settings. Various steps have been taken by Govt. of India including utilization of Mobile Medical Units for delivery of services, especially follow up care for Reproductive, Maternal, New-born & Child health services, duly following physical distance norms and appropriate protection measures for the health workforce after the lockdown.

In the 21st century, technology is taking over education. There is a continuous shift from conventional means of learning to experimental methods of transacting learning. With current developments and laddering up of India in the cadre of education, opting Simulation Training is feasible to some extent. However, fear of making mistakes and logical challenges must be addressed to maximize learning. Teamwork, adaptability, and building a safe learning environment can enhance the quality of simulation – based training, which could ultimately help to improve maternal and neonatal outcome. Midwifery leaders are striving towards the maximal and optimal learning to strengthen midwives during their training and education. A major example for

the same is establishment of skill labs all across country and preparation of master trainers and trainers. Along with this, National, state and institutional level conferences, simulation training workshops are being organised timely to motivate, prepare and enhance the skills of the students, working midwives across the country. In India, cultivating Simulation training in Midwifery training is not a dream anymore. It is a continuous effort which is being taken across the country to strengthen the profession.

This fight against the pandemic can only be won together, by combined efforts and taking small steps conjointly.