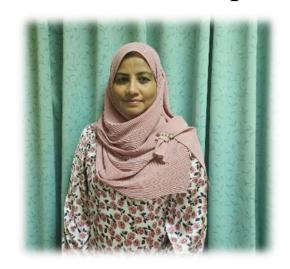# Nurses' Participation in Policy Process

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The policy process describes how policy actions are initiated, formulated, developed, negotiated, communicated, implemented, and evaluated. Evidence indicates that policies are significant globally, nationally, and especially in healthcare systems. Nurses are an essential part of healthcare policies, and nurse leaders and healthcare experts agree that nurses are responsible for addressing the nation's health problems by participating in health policy development (Kunaviktikul et al., 2010; Waddell et al., 2017). The main reason is their significant healthcare system representation at the local, regional, national, and global levels (Barzegar Safari et al., 2020; Salvage & White, 2019). Nurses' involvement in the

policy process and analysis can inform policymakers of evidence-based policy-making (Benton et al., 2020; Turale & Kunaviktikul, 2019). However, research demonstrates that nurses face challenges in influencing policies and contributing to the policy arena (AbuAlRub & Foudeh, 2017; Hughes, 2010).

Literature reveals that nurses are marginalized and powerless in participating and influencing policy making (Rasheed et al., 2020). Annesley (2019) states that nursing needs the policy to provide context to nurses' practice, roles, and knowledge, frame patients' needs, manage resources best, and ensure safe, high-quality patient care. Therefore, engagement in policy and politics allows nurses to partner with others to ascertain the lead in delivering effective and efficient care (Shariff, 2014). They also have specialized knowledge and can change the health system (Cheraghi et al., 2015).

However, nurse leaders perceive they are excluded from the policy development process and tend to be given ad hoc responsibilities or involvement in policy formulation as it is not a priority for

them (Asuquo, 2019). Several studies report a lack of knowledge and skills, a negative public negative image, and disregard for nurses' ability and credibility support to be part of policy making arena (AbuAlRub & Foudeh, 2017; Cheraghi et al., 2015). Benton and Al Maaitah (2017) state that barriers related to access issues, such as the non-availability of research, lack of policy and political content in education, and the difficulties of synchronizing programs with available legislative session time. In a study conducted by Barzegar Safari et al. (2020), participants acknowledged gender as a factor influencing policy development, especially if the female gender is involved. Additional literature supports the finding, such as nurses occupying junior positions and doctors or other health professionals representing nursing issues at the policy development forums (Juma et al., 2014).

However, policy advocacy is regarded as a critical nursing element with deep roots in the history of the nursing (Twining, 2010). Evidence indicates that nurses' associations can influence policy nationally and globally (Benton, 2012). The scoping review by MacDonald (2012) identified frameworks used for policy advocacy included extensive stakeholder analysis, navigation through various

stages of the policy cycle, and placing of efforts in multiple settings (e.g., forums, courts, arenas, and frameworks for policy advocacy with different approaches and various targets entailed working in both collaboration and conflict with other stakeholders is vital. National organizations can trigger policy strategy, tactics, and direction and initiate nursing policy action by getting attention to the critical point of solving "ordinary problems" in nursing to policy development for change collaboratively through social media (Koehn, 2020).

Chiu et al. (2020) examined nurses' influence on health systems and policy, charting a research agenda for the advancement using Walt and Gilson (1994) Health Policy Triangle to explore the nature and characteristics of policy issues, the internal and external contextual factors that influence decision-making, the stages within the public policy process, and the relationships, networks, and coalitions within their policy subsystems that control their advocacy work. The review concluded that critical national and global events such as elections or pandemics would continue providing nursing and other health organizations opportunities to showcase their policy agendas, engage the public, and demonstrate leadership. Deschaine

and Schaffer (2016) utilized Longest's model of public policymaking as a theoretical framework to explain how politically competent public health nurse (PHN) leaders can be involved in the health policy-making process, setting the policy agenda by helping define the issues to be addressed (policy formulation), participating in the development of possible solutions to the problems (policy implementation), and serving to generate the political circumstances of problem-solving into action policies (policy implementation and policy modification).

In summary, the literature provides evidence for nurses' participation in the policy process, not just policy implementation. Furthermore, nurses' involvement in policy process and analysis can inform policymakers of evidence-based policymaking, especially on the nursing workforce, nursing service, and improved patient care.

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