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Agenda item 7.2 Implementation of the International Health Regulations

The International Council of Nurses (ICN) welcomes the adoption of the amendments to the International Health Regulations (2005), which align closely with the Pandemic Agreement and signal a unified global approach to health security.

Nurses are the backbone of health systems and are crucial in epidemic and pandemic responses, with skills rooted in evidence-based care. They must be empowered to influence preparedness and response planning, as they best understand how to protect both health workers and the public.

Governments must appoint and empower Chief Nursing Officers with the authority to shape national preparedness strategies. Furthermore, every committee responsible for pandemic planning—whether global, regional, or national—must include nurses, ensuring that planning reflects frontline realities.

ICN emphasizes that investment in strengthening the nursing workforce is an essential component of preparedness and response to health emergencies. Financing must go beyond systems and surveillance to reach the workforce directly. Sustainable surge financing should strengthen nursing education, retention, and protection, particularly in lowand middle-income countries where shortages are most acute. Nurses must have access to ongoing training and capacity-building programs that prepare them to respond effectively to current and future epidemics and pandemics.

Equally, protecting health professionals from preventable adverse events in emergencies is paramount. Health professionals are among the most vulnerable during crises, facing risks to their safety, security, and wellbeing. All forms of workplace violence, as outlined in the Health Emergency Preparedness, Response and Resilience (HEPR) framework, must be urgently addressed to ensure health workers can safely deliver care.

In sum, these amendments represent an important step, but their success depends on whether they empower nurses to lead, invest in their capacity, and protect them as they respond. Pandemic preparedness that excludes nursing leadership is incomplete preparedness.