This is different

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Martin Luther King Jr, in the midst of the civil rights movement, referred to the ongoing protests by noting, 'It would be fatal for the nation to overlook the urgency of the moment'.[1] Broaden the context to the entire world as it faces and responds to the COVID-19 pandemic, and his words resonate today. The healthcare system and society more broadly are facing a situation with little precedent in its pace, health and economic impact, global reach and the societal distress it causes.

The pandemic has escalated at breathtaking speed, leaving healthcare organisations and professionals struggling to plan, respond and cope. On 27th February 2020, the Johns Hopkins University Centre for Systems Sciences and Engineering reported 82 700 cases worldwide, most of these in China; just over 1 month later, on 1st April 2020, that number was exceeded by cases in Italy (105 792), Spain (102 136) and the USA (189 633), while the global figure stood at 873 767.[2] On the same date and time, deaths worldwide numbered 43 288, with the Imperial College COVID-19 response team estimating that unmitigated, the pandemic could lead to 40 million deaths globally this year.[3]

Allied to the health impact there is the socioeconomic one. As social distancing is adopted by most affected countries, the reliance of local and global economies on the unimpeded mobility, and close physical proximity, of large numbers of those in work, has been exposed. In the USA on 27 March 2020, the numbers filing for unemployment benefit jumped from some 210 000 to nearly 3.3 million,[4] and governments worldwide have been announcing economic stimulus packages at unprecedented scale and pace. On 25 March 2020 it was estimated that over a quarter of the world's population were already living in some form of 'lockdown' with restricted mobility and civil liberties.[5] The physical and mental health impacts of prolonged domestic confinement, limitations on activity and exercise, loss of income and employment, to say nothing of diversion of existing health resources to counter COVID-19, are as yet unquantified but will be significant.

But in the short-term, most alarming of all for leaders has been the sight and the prospect of the health and care systems of some Western democracies being overwhelmed by numbers of patients requiring hospitalisation and, most challengingly, the high proportion of these who require intensive care. Alongside tragedy unfolding in Italy and Spain, herculean efforts have been underway, in countries further behind them on the epidemic curve, to expand critical care and other hospital capacity, and to protect their health and care staff from contracting and spreading the infection themselves. Yet even these sadnesses are surely just an early forerunner of what is likely to come, as the health and economic impacts of the pandemic are felt in low-income countries, and by poorer people worldwide.

Self-evidently, the pandemic will stretch to the limit the very systems—and the people who constitute those systems—that any one of us might need to rely on urgently in the coming months. It presents extraordinary challenges for leaders, who must contain the anxieties of those they lead, provide for their safety and well-being, create conditions where systems and individuals can deliver the best possible outcomes in straitened circumstances for the largest number of patients and continue to adapt their plans and actions to rapidly changing circumstances. The need for all leaders to lead effectively has never been greater.

At *BMJ Leader* (supported by our joint owner the Faculty of Medical Leadership and Management)[6] we are dedicated specifically to considering leadership issues in health and care. As noted in our mission statement, 'Our overarching purpose is to improve the results and experience delivered by health and care systems for their patients, populations and workforces'. We aim to do this by building better leaders, and nurturing communities of leaders across occupations and specialities, in all career stages, and in all of the different types of organisations that make up the larger health and care system. There is widespread agreement over the importance of effective leadership and teamworking in health and care,[7] but the pandemic makes our mission of leadership support and development more urgent than ever before.

In the coming weeks, readers of *BMJ Leader* will find comment, opinion and reflection from leaders engaged in the COVID-19 pandemic response and from leadership development practitioners across the globe. Existing article formats will be complemented with new ones, allowing us to share the experiences of more leaders more rapidly, and across a broader range of contexts. Consistent with our mandate as a peer-reviewed journal that aims to advance research, we will continue to welcome original research on leadership issues, and fast track the review process for submissions directly related to covid-19. We hope that through these changes, *BMJ Leader* can play a supporting and agile role, informing, connecting and nurturing those providing leadership, at all levels, as this great crisis unfolds and is in time, we trust, overcome.

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