
NEWS FROM JACHN

Topics of Japanese Community Health Nursing

1. Definition of Community Health Nursing ; We Have Just Re-defined.

Sanae Haruyama

Chair of Community Health Nursing Academic Term- Working Group

Community health nursing science is an academic field that explores the contribution to the improvement of quality of life and to the construction of safe and healthy communities to support it.

Community health nursing practice aims to ensure the continuity of people's lives and contribute to the improvement of quality of life through supporting the health and safety of people.

Community health nursing is a practical science that grasps the life of people at various health levels living in various places continuously and comprehensively and explores effective nursing care while collaborating with people and the community.

2. Best Research Awards of Japanese Community Health Nursing

1) Population-based Study to Explore the Risk Factors to Locomotive Syndrome among community-dwelling Middle-aged People in an Urban Area

Eriko Ito

Graduate School of Medicine, Yokohama City University

We are honored to receive the Best Research Awards of Japanese Community Health Nursing for the title of "Population-based study exploring risk factors to locomotive syndrome among community-dwelling middle-aged in an urban area: the Yokohama Locomo Study". (Vol.20, No.1, p4-11)

Japan is faced the era of the 100-year life. This creates a pressing problem in addressing health promotion activities for the middle-aged population as well as care prevention for the old-aged. According to the most recent National Livelihood Survey conducted by the Ministry of Health, Labour, and Welfare in Japan¹⁾, musculoskeletal disorders, including osteoporotic fractures and falls, are ranked fourth and osteoarthritis is ranked fifth among conditions caused by locomotive syndrome. The middle-aged population is in a period when lifestyle related to locomotive organs is easily disturbed and health condition is easily changed due to high responsibility at work and at home. However, there is insufficient research on prevention of locomotive syndrome in the middle-aged population.

The purpose of this study is to explore the risk factors for locomotive syndrome among community-dwelling middle-aged people in an urban area and to suggest health promotion activities for the middle-aged. This cross-sectional study involved general citizens aged from 40 to 64 years in Yokohama City, with a self-administered questionnaire by mail and

physical performance tests. Data were collected on the presence of locomotive syndrome stage 1 (LS) by index of stand-up test as dependent variables, demographics, physical characteristics (blood pressure, grip strength, body mass index (BMI), perceived ill-health), and social characteristics (scale of social activities, awareness of social resources) as independent variables. The logistic regression analysis was conducted to explore risk factors to locomotive syndrome. A total of 139 populations participated in both the primary and secondary survey. The mean \pm SD age was 56.2 \pm 6.9 years, and 94 (67.6%) were female. The prevalence of LS was 29.5%. The logistic regression analysis indicated that BMI (OR 4.54, 95%CI 1.63-12.69), perceived ill-health (OR 0.74, 95%CI 0.55-0.99), social activities, (OR 0.75, 95%CI 0.62-0.91), awareness of social resources (OR 3.70, 95%CI 1.55-8.83) were risk factors for LS. The present study demonstrated that 30% of middle-aged people are facing the risk of locomotive syndrome. It is suggested that health practitioners should develop interventions to modify or maintain lifestyle, and to create social activities for middle-aged people.

Finally, we would like to thank all the participants in this study, and commit to continuing to develop the theory and practice of health promotion among community-dwelling people.

(1) Ministry of Health, Labour, and Welfare (2016): Comprehensive Survey of Living Conditions.

2) Needs Related Child Rearing in Mothers with Cerebral Palsy Children Discharged from the Neonatal Intensive Care Units (NICU) by Focusing on Infant Stage

Satomi Morimura

Hokkaido Medical Center for Child Health and Rehabilitation

There was a need for a partial revision of the Child Welfare Act and other regulations, and in 2016, the obligation of local governments to establish a Comprehensive Child Rearing Support Center and the 2018 Basic Act on Child Development were enacted. These will ensure that through cooperation between institutions the healthy development of child growth is not interrupted, and that the environment will be supported by society as a whole.

With the development of perinatal treatment, infants who have been treated with neonatal intensive care at NICU, after achieving stability from the acute phase, and at home early in order to form attachment for the parent and child.

Needs in child rearing for mothers of children with cerebral palsy discharged from Neonatal Intensive Care Units (NICU).

This study employed a qualitative descriptive approach with a descriptive analysis.

Participants were six mothers of first-born children (younger than 3 years) with cerebral palsy, among whom four were born with extremely low birth weights and two suffered from severe neonatal asphyxia.

Data were collected through semi-structured interviews.

From ethical considerations, the research collaborators had the research objectives explained verbally and in writing, and consent was obtained in writing.

The study was also approved by the Research Ethics Committee of Tenshi College and the Ethics Committee of the Hokkaido Medical Center for Child Health and Rehabilitation.

Needs in child rearing for mothers of children with cerebral palsy were classified into nine categories, and with three classifications for child-rearing needs.

1 “Needs for care involving treatment” were related to the following needs, and showed mothers as willing to meet the basic requirements of the children including diet, sleeping patterns, and cleanliness, and developing the skills needed to conduct daily life safely.

There were characteristic causal early classic symptoms gradually appearing in the central nervous system functions after leaving the hospital NICU.

2 “Needs facilitating development of the child”: when the mothers anxiously realized the disability of the child, they made determined efforts to ensure the growth of the child through effective rehabilitation at facilities for care and education. The mothers showed the desire to realize their feelings for the development of the children to ensure the prospects for the future to continue from birth to the present.

3 There were “needs in the child-rearing environment”, such as understanding and cooperation among family members, achieving peace of mind for the medical condition and childrearing from medical staff, and meeting other mothers who could share their troubles and concerns, receiving adequate support from the family and in the child rearing conditions involved in the childrearing environment.

Instability is an issue in the emotions of mothers of children who are born with low birth weights and who suffer from severe neonatal asphyxia, at the diagnosis and when cerebral palsy is noticed, then from infancy where rehabilitation at facilities for care and education starts, and also when symptoms appear, from the early stage of NICU hospitalization and continuing while observing the growth and development of the child. Here it is vital for clinical and community nurses to share information through joint conferences, and by other means, and to

provide continuous support in cooperation with the mothers toward future discharge from the NICU.

Improving the child-rearing environment for mothers and children reduces the child-rearing anxiety and child-rearing burdens and promotes mother-child bonding during the development of the internalizing of the role of the mother in the child-rearing period and builds family support supported by nurses in early treatment and education. Flexible response of existing systems in the geographical region of residence and the establishment of a childcare support system are urgent issues

3) The Structure of Decision-making about the Discharge of Persons with Early Onset Dementia from a Psychiatric Facility among Family Caregivers

Yuko Tanaka

School of Nursing and Social Services, Health Sciences University of Hokkaido

In Japan, there are around 37,000 people who have early onset dementia (EOD). The behavioral and psychological symptoms of dementia (BPSD) are the main determinants for hospitalization. In Japan, the hospitalization period for dementia is long and family caregivers also suffer from serious BPSD. Family caregivers face difficulty in making decisions about discharge. The family caregivers of persons with EOD experience a dilemma between the dedication to care for their spouse and their own changing perspectives of their future.

The aim of this study is to examine the structure of decision-making among family caregivers about the discharge of patients with EOD from a psychiatric hospital.

Participants included 7 family caregivers of patients with EOD. Family caregivers were recruited from the Medical Centers for Dementia in A

prefecture, from the families of patients with EOD. As a qualitative descriptive study, we used an interview guide and conducted semi-structured interviews. Interviews focused on exploring how family life changed after a person with EOD was admitted to a psychiatric hospital, the concerns of family caregivers related to discharge, and the decisive factors for family caregivers for discharge.

This study was approved by the ethics committees of the Department of Health Sciences in Hokkaido University (approval number 14-39).

Participants were 7 family caregivers, comprising 5 spouses and 2 sisters. The average age of participants at the time of admission was 56.3 years old (48-65 years). The average length of hospital stay was 8.5 months (2-24 months). Two people were discharged to home and 4 to facilities.

Finally, 4 categories were extracted to assess the structure of decision-making about the discharge of persons with EOD from a psychiatric hospital among family caregivers.

“Responsibility of assuming care for persons with EOD when there is no other choice” was a precondition, and “realistic judgment of whether home care is appropriate,” “integrated family caregiver’s life and facing the person with EOD” after their departure and return, and decision-making about the place of discharge were considered. In addition, “awareness of the surrounding environment to encourage the decision” was influenced.

The discharge destination based on the caregiver’s decision-making not only affects the life of patients with EOD, but also leads to reconstruction of the family caregiver’s life. It is important to support the family caregiver, who may affirmatively decide the discharge destination when the patient approaches old age. Moreover, to support the decision-making of the family caregiver,

it is necessary to enhance the social resources and provide appropriate information for the patient with EOD and their families.

Finally, we will continue to strive to contribute to people with EOD and their families through our research activities.

The 6th International Nursing Research Conference of World Academy of Nursing Science Session for knowledge and practice provided by JACHN

1. Overview

Ayumi Kono

*In Charge of International Exchange Committee,
Dept. of Home Health Nursing, Osaka City
University*

World Academy of Nursing Science (WANS) aims to contribute the health and wellbeing of people by facilitating nursing science through global research collaboration, scientific conference, and scholarly exchanges, founding by 17 organization members regarding nursing in the world. Our society, the JACHN is one of member organizations.

The 6th WANS (Chairperson Prof. Noriko Katada, Kansai Medical University) with the theme of “Knowledge development in nursing for better health and life of the People in the World: Sharing the Local Knowledge for Universal Knowledge” was just about to hold on February 28-29, 2020, in Osaka. However, unfortunately the 6th WANS cannot help deciding to present all of sessions in abstracts and cancel the conference in person just a few days ago the scheduled day, to avoid the spread of COVID-19 which had reached a critical stage worldwide.

The JACHN was having the session for knowledge and practice, which theme was “Nursing strategy of the of the community-based integrated care system in a super-aging society”. I would like to introduce the outline of the session in the present newsletter.

Japan, with 27.7% of its total national adult population aged 65 years and over – 13.8% of which were aged 75 years and over in 2017 – is the front runner of super-aging societies in the world. Last decade, the community-based integrated care system, which is defined as a care system to ensure the provision of health, long-term and residential care, and livelihood support, was advocated to sustain our limited health or long-term care resources in Japanese national policy.

In the session, three topics were presented, by Dr. Masako Kageyama, PhD & PHN (Osaka University), Dr. Miyuki Ishibashi, PhD & RN (Chiba University), and Dr. Ryoko Kawasaki, PhD & RN (Oita University of Nursing and Health Sciences), respectively.

Dr. Kageyama’s presentation discussed community assessment to identify care needs in the community. She lectured the significance, definition and theoretical foundation of community assessment provided by public health nurses, emphasized the strength of community assessment which was initiated by individual care needs in the community and showed integration of collected quantitative and qualitative data to identify community care needs based on the Community as Partner Model.

Dr. Ishibashi reported on continuity nursing care between hospitals and community strategies focusing on health and long-term care for older people. She has shown that the systematization of nursing skill related to discharge planning including assessment of the power of the individual,

supporting of family members, collaboration with family member and health care professions, and improving care system, according to qualitative data for interviewing a large number of nurses in charge of discharge planning.

Dr. Kawasaki addressed optimal and adequate utilization of community-based resources for the well-being of older adults in a depopulating society. She mentioned the effects of community-based voluntary or involuntary assembly for older adults living on social network or support in neighborhood and their self-rated health. In particular, she concluded that community health nurses could have strategy to build community social network involving residents in various generations, educating local volunteers, and collaboration with local industries.

Thus, in this session a community health nursing strategy could be identified and discussed as the basis to formulate a community-based integrated care system to function efficiently in a super-aging society.

2. Brief Reports of Participants

Meng LI

Graduate School of Medicine, Osaka University

A Brief Report Focusing on Presentations/Sessions in Tobacco Control

Tobacco use is the largest preventable cause of death globally, and is responsible for more than 8 million deaths each year. In light of this troubling fact, the World Health Organization has always been urging health professionals including nurses to engage in tobacco control. In the 6th WANS conference, it was very pleasing to see many nursing studies in tobacco control including epidemiological survey (P1-213, P2-154), the

analysis of smoking-related factors (O-24, P1-194, P1-212, P2-116), nurses' intervention skill (P1-128, P1-173) and support needs and the effects of smoking-related programs (P1-148, P1-184)

In the 2 epidemiological surveys, Tanaka & Taketomi demonstrated that passive smoking and having a dog might have a synergism to worsen the incidence of asthma among Japanese elementary school students aged 6-12 years. Moreover, Sakai et al. demonstrated that environmental tobacco smoke exposure was positively associated with severe menstrual-related symptoms and depressive symptoms in never-smokers among Japanese adolescent girls aged 16-18 years.

In the 4 abstracts on the analysis of smoking-related factors, Ota et al. demonstrated that maternal smoking during pregnancy was associated with maternal abnormal behaviors such as consuming alcohol and feeding their babies with formula. Furthermore, the systematic review with meta-analysis by Li et al. reported that age, depression disorders and side effects of varenicline were associated with success in quitting smoking in the Japanese smoking cessation treatment program. In the 2 overseas studies, Nakaseko et al. demonstrated that mother's better educational background and father's regular occupation could help prevent smoking and drinking among minors in Vanuatu. Banstola et al demonstrated that interventions at family and school level to enhance self-esteem, perceived social support, and social capital for adolescents were helpful in protecting them against risky behaviors including smoking behavior in Nepal.

In the 2 abstracts on nurses' intervention skill and support needs of public health nurses (PHNs), Sezai reported that the frequently used intervention

skills of addiction including nicotine dependence included 5A (Ask, Advise, Assess, Assist, Arrange), motivational interviewing, and SBIRT (Screening, Brief Intervention, Referral to Treatment). A qualitative study conducted by Michibayashi et al. reported that support needs of PHNs working on tobacco control in local governments were "providing study findings", "acquiring of effective material", "establishing a network with external lecturers and researchers", "strengthening legal regulations on national tobacco control", "support for increasing skills in collaboration with schools", and "support for increasing the knowledge of health effects of tobacco and advocacy skills".

Concerning the effects of smoking-related programs, Inaoka et al. assessed the suitability of an educational comic booklet for preventing second-hand smoke for pregnant women at home. In addition, Teruya et al. assessed the effects of a cancer education program including avoiding smoking for elementary school students.

Overall, nurses are in a unique position to enhance tobacco prevention and cessation. In future WANS conferences, we are looking forward to see more nursing studies in tobacco control.

Publisher: International Exchange Promotion Committee

Ayumi Kono (Osaka City University), Kaoru Konishi (Osaka University),

Reiko Okamoto (Osaka University), Miho Hamayoshi (Bukkyo University),

Kyoko Yoshioka (National Institute of Public Health),

Secretariat of JACHN:

162-08252F Ozawa-building, 4-1-1, Kagurazaka, Shinjuku-ku,

Tokyo

TEL: +81-(0)3-5206-7431 FAX: +81-(0)3-5206-7757

Conference Advertising

The 7th Conference on International Collaboration for Community Health Nursing Research: ICCHNR

Date : June 22-23, 2021

Venue : Linnaeus University in Vaxjo, Sweden

Greeting : At Linnaeus University we are very proud to be hosting the upcoming 2021 ICCHNR-conference. We aim to turn this conference an opportunity for researchers from both near and far to attend and to present their most recent research findings in the field of "Community nursing towards sustainable health". We hope to attract specialists from various disciplines of community nursing, professional, education, research and management to the conference.

Website : <https://lnu.se/en/meet-linnaeus-university/conferences/community-nursing/>

The 6th International Conference on Global Network of Public Health Nursing: GNPHN

Date : January 7-9, 2022

Venue : Grand Cube Osaka, Osaka City

Chair : Reiko Okamoto, PhD (NS), (Professor, Graduate School of Medicine, Osaka University)

Vice Chair : Tamami Matsumoto, (Executive Director of Public Health Nursing, Osaka City Government)

Website : <https://www.gnphn.com/>

The 23th Conference on JACHN

Theme : Visualization of Community Potential and Making a Difference in Care

Date : August 29-30, 2020

Venue : Osaka International House Foundation, Osaka City

Chair : Ayumi Kono PhD, RN, (Professor, Dept. of Home Health Nursing, Osaka City University)

Program :

◆Chairperson's speech : Ayumi Kono

Visualization of Community Potential and Gerontological Care

◆Special lecture: Ryo Yamazaki (studio-L Inc.), Ayumi Shintani (Graduate School of Medicine, Osaka City University), Katsunori Kondo (Center for Preventive Medical Sciences, Chiba University)

◆Educational lecture ◆Symposium ◆Appointed workshop ◆Poster session ◆Workshop ◆Open lecture

◆Reception

Website : <http://jachn.umin.jp/meeting/m23/index.htm>