



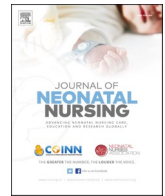
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Journal of Neonatal Nursing

journal homepage: www.elsevier.com/locate/jnn

Editorial

Another year ends



And so, we come toward the end of 2021, nearly 2 years into the global pandemic. Twenty-one months ago, we could not have predicted that COVID 19 would still be a problem to us now. Then the emerging evidence seemed to be that this was not a disease that affected neonates to any worrying extent. As the variants mutate, and the virus attacks younger people, we are beginning to see a rise in morbidity and mortality among pregnant women – and with these poor outcomes for some of their babies (Villar et al., 2021). In this issue we will not dwell too much on the pandemic, although it is impossible to completely ignore it. but continue to celebrate good nursing care for vulnerable babies throughout the world.

To this end we start in the USA where Jacqueline Mery and her colleagues reviewed the literature on teaching safe sleep practices to new parents. Although there is a growing body of evidence that this education takes place it is often packaged with other information meaning that the message may be lost. Of particular interest to neonatal nurses is the unsurprising finding that compromised babies are often nursed prone. This makes it more difficult for parents to “train” their baby to sleep supine and may also give a mixed message on the importance of this practice. I read it with interest. Our second review article is of great interest to those of us involved in education of neonatal nurses. Patricia Bromley and her Australian colleagues review work-based education strategies in the neonatal area. This is the first publication from an ongoing project, and we look forward to seeing more in this series.

Just as interesting is Catherine Larocque, and her Canadian colleagues’ concept analysis on family centred care in the neonatal unit. It is fascinating that they conclude that family centred, and indeed family integrated care, is a philosophical concept rather than a model of care. Casey and Mobbs (1988), published their, then innovative, thoughts on partnership in care in children’s nursing. At the time they were both clinical nurses trying to negotiate better ways of caring for children and their families. They were criticised for producing a nursing model which, although generally adopted by children’s nurses, was untested and was “mid-range” rather than grand theory – therefore not qualifying as a model of care at all (Lee, 1998). Such things were important then (Fawcett et al., 2001) – and indeed are important now. Carey and Mobbs always maintained that they were not trying to build theory but to describe an innovative and useful way of working. Fawcett et al. (2001) would have called that practice-based theory and a theory which has evolved over time (O’Conner et al., 2019). The pandemic had deconstructed our practice of family centred/integrated care in neonatal nursing worldwide (Shaw et al., 2021). Larocque, and colleagues have explored where we were pre-pandemic. We have now got a chance to rise to the challenge, and to use our newly acquired knowledge to

improve our practice in the future (Montes et al., 2020). With this in mind Marsha Campbell-Yeo, and Canadian colleagues, co-designed pathways to ensure that family centred care continues as well as was possible during the pandemic. A very interesting read.

Maíra Domingues Bernardes Silva, and her Brazilian colleagues, have demonstrated that, even in a hospital which sees many babies with life threatening congenital anomalies, it is possible to have very high rates of exclusive breast feeding at discharge. This is, at least partly, due to the Baby Friendly Initiative and it is clear from the breakdown of congenital anomalies seen there that some of these babies could not have tolerated breast milk because of their medical conditions. It is heartwarming to see that, even in those circumstances, breastfeeding is being supported and encouraged.

Shokoufeh Modanloo, and colleagues across Canada and Australia produced a video about pain relief in babies having painful procedures. They translated it into other languages including Farsi and were able to show that it was useful to immigrants in English speaking countries whose first language was Farsi. The video was, however, blocked in Iran where Farsi is commonly spoken. With the current unrest in other Farsi speaking nations, we can only hope that this important message, that babies need pain relief, will not be entirely blocked. Jiale Hu, working with the same team, showed the video in China, demonstrating a great deficit in knowledge of neonatal pain management among nurses there. Although these were both worrying findings, Fatemeh Taghinejad and colleagues describe how nurses are using nursing diagnosis to improve care of neonates in Iran. Hopefully this is a sign of the empowerment of nurses to act as advocates as well as carers for our patients worldwide. Continuing the theme of pain relief, Serap Balcı and some Turkish colleagues ran a randomised controlled trial to show which Lancet caused less pain during heel pick sampling but were unable to show a difference. All these articles show an ongoing commitment among neonatal nurses to providing pain relief for babies in their care.

Julia Hofbauer and colleagues, working in Germany, showed how diaries, kept by parents of babies needing neonatal care, helped them to develop or maintain hope, fostering a belief that everything would work out well in the end. Meanwhile, Ashlee Vance and colleagues, working in the USA, showed that fathers of neonates with complex needs lacked confidence in their ability to parent and that this does not improve over time. Fathers still lacked confidence after their children were discharged home. Sedigheh Khanjari and Iranian colleagues demonstrated how an educational package could improve the sense of coherence and quality of life of post neonatal parents. All these articles point to the fact that the mental health of parents whose children need intensive is vulnerable and it must be at the forefront of our minds as we offer care. This can be facilitated by something as simple as Syawal Kamiluddin Saptaputra and

<https://doi.org/10.1016/j.jnn.2021.09.007>

Available online 29 September 2021

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colleagues in Indonesia redesigning their chairs so that mothers can be comfortable during kangaroo care. Alhassan Sibdow Abukari, and colleagues in Ghana, show how low Apgar scores at 5 minutes are associated with prematurity and low birth weight. This is not news to anyone, but they plan improvements in obstetric care which should lead to the most vulnerable babies getting better care.

So, once again we were able to offer you a varied and interesting group of articles. We now need only wish you happy holidays, and a bright new year.

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