

Vol. 13

Japan Academy of Community Health Nursing  
Established October 15, 1997

MARCH 2014

# NEWS FROM JACHN

## Special Topics on International Conferences

### 1-1. Brief report on the 5<sup>th</sup> ICCHNR

Shuhei Fukagawa, MN, RN, PHN  
Nishi Health Center, Sapporo City, Hokkaido

The two-day 5th ICCHNR was held from March 13 to 14, 2013, in Scotland's capital, Edinburgh. The theme of the conference was "Transforming Community Health: Nursing Impact." A total of 96 poster entries from six themes were presented.

This ICCHNR was my first time participating as a foreign traveling attendee. The streets of Edinburgh were old, reflecting the charm of each of the buildings. In addition, the scenery surrounding Edinburgh Castle was memorable.

Participants came from various countries, and I enjoyed the diverse atmosphere of the international conference. Indeed, the conference program included tea time, through which I appreciated the cultural diversity of the program.

A reception was held after the conference, where I engaged in mutual exchange with participants from other universities in Japan as well as those from other countries. Particularly, in my research field, "participation of the father in childcare," I learned the importance of the cultural point of view through information exchange and discussion with researchers from similar domains. My English proficiency may be limited, but the other scholars were very kind. I endeavored to interact with other participants using body language.

In participating in this conference, I realized I am still far from grasping all the charms of Edinburgh. Next time, after improving my English, I intend to return to Edinburgh and discover its attractions thoroughly.

### Contents

- Special Topics on International Conferences
- Guideline for Public Health Nursing Practice at the Community Level
- Current Research Vol. 16(1)-(3) of JJACHN
- Announcement of the 17th Annual Meeting of the JACHN



### 1-2. Brief report on the 5<sup>th</sup> ICCHNR

Ayano Saito, MN, RN, PHN  
Shiroishi Health Center, Sapporo City, Hokkaido

For my first time stepping into another country, I was welcomed by a beautiful winter in Edinburgh; the stone pavement along the streets and the orange street lights provided warmth despite the chill. It had the same temperature as Sapporo in March, and the air in the city was relaxing. I reveled in passing time in a city with a long history.

I presented my poster at the University of Edinburgh. As there were many Japanese participants, I felt less tension, even though it was my first international conference. My presentation was on self-medication, and, given the varied international prescriptions, I received many questions from researchers from various countries. This experience stirred me to consider deeper the systems in various countries and the differences between Japan and other countries. I discussed problems and common points in each country with other experts during the reception or during their presentations. It was such a learning experience for

me. I also realized the importance of conveying my message in an international event in fluent English. During mutual exchanges with many participants, I recognized that this direct meeting with participants from other countries allowed me to understand how they think from interacting and sharing information.

This trip to Edinburgh was an opportunity for me to learn the differences between practices in other countries and those in Japan. It was also such a pleasant experience for me to enjoy academic exchange in the atmosphere of another country.

#### **2-1. Brief report on the 3<sup>rd</sup> IPHNC**

Shizuko Omote, PhD, RN, PHN

Faculty of Health Science, Kanazawa University,  
Kanazawa City, Ishikawa

The 3<sup>rd</sup> IPHNC was held at the National University of Ireland, Galway (in Irish: Gaillimh), on August 25–27, 2013. Galway is in the western part Ireland, approximately three hours by train or highway bus from the capital, Dublin. The theme of the conference was "Making a Difference: Public Health Nursing Contribution to Primary Health Care," which included 40 oral presentations and 50 poster presentations. Participants were mostly from Ireland and other European countries, but there were also participants from 24 other countries, such as Brazil, Sri Lanka, Australia, and the USA. Japan sent a delegation of 15 first-time participants.

I joined as a poster presenter, and I interacted with other participants during poster viewing. The north latitude of Galway is 53 degrees, but snow does not fall during winter because it faces the Atlantic. However, the cold rains and winds during winter are considered factors in the unhealthy lifestyle of many elderly people, such as consuming alcohol, smoking tobacco, and living an inactive life, particularly for men. This lifestyle is considered their way of life and culture—"no other choice," they say. Important aspects of culture should be retained, but harmful practices should be changed from the specialized perspective of public health nursing. In addition, experts in public health nursing gathered in this conference. This event proved to be a valuable opportunity to learn the education and ways of thinking of other participants from various

countries in the keynote lectures. Many common topics were also covered, such as integrating the importance of evidence-based



actual practice and community assessment in education. I look forward to holding this conference in Japan and to the day when public health nursing experts gather again.

#### **2-2. Brief report on the 3<sup>rd</sup> IPHNC**

Yuki Kanzaki, MN, RN, PHN

Graduate School of Human Health Sciences, Tokyo  
Metropolitan University, Arakawa City, Tokyo

In joining the three-day 3<sup>rd</sup> international public health nurse conference last August 25–27, 2013, I had the opportunity to visit Ireland National University, Galway. This conference was attended by 500 public health nurses (PHNs) from 24 countries, all of whom were practitioners and researchers of community health nursing or public health nursing. The conference was attended by around 15 participants from Japan.

Welcome lectures kick-started the meeting in the afternoon of the first day. Afterward, participants enjoyed a meal, with live performances of Irish songs in the background, while socializing with other participants. The programs of the second and third days were keynote lectures, as well as oral and poster presentations. The keynote lectures emphasized the importance of implementing study results and their contribution to primary health care. The research presentations varied in focus, such as the evaluation of the public health nursing practice model, designs for education curricula, community assessment education using modern tools, efforts on various types of cooperative initiatives, and comparison of recognition and knowledge based on different specializations. Participants actively posed questions to presenters and exchanged opinions during the Q&A portion. In addition, participants discussed problems specific to their country with one another during recess periods. I

could feel an atmosphere of closeness in this meeting.

I presented a poster on the issue of the characteristics of the community-dwelling elderly who receive continuous care from PHNs. Many expressed interest in my study and asked questions. As my English proficiency is poor, I felt that I could not completely answer the questions and did not provide a thorough discussion. However, by receiving questions from other researchers, I noticed a lack of explanation and ambiguities in the ideas in my study.

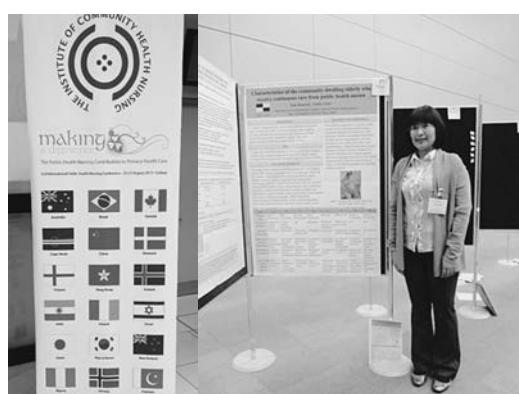
Participating in an international meeting reaffirmed my faith that PHNs and nurses who are active in their region or country provide support for people's health maintenance and enhancement. I observed that differences in social background, health care systems, and health issues exist between Japan and foreign countries. By being exposed to studies conducted in other countries, I recognized the strengths and problems of nursing practices in Japan from a new point of view. In addition, by reporting Japanese practices and problems at an international event, I benefited from exchanging opinions with researchers from other countries, which could help develop my study further.

I realized my English proficiency is still limited, and therefore I would like to challenge myself to present my study results in other international events in the future.

### **3. Brief report on the 141<sup>st</sup> APHA**

Chu Hyang Oh, MNS, RN, PHN

Graduate School of Human Health Sciences, Tokyo Metropolitan University, Arakawa City, Tokyo



Health Association was held in Boston, Massachusetts, USA, November 2-6, 2013. Boston, located on the east coast, has a rich history and has seen the war for independence and, later, the birth of the USA. In addition, this area boasts renowned universities such as Harvard University and Massachusetts Institute of Technology.

The theme of the conference this year was "Think Global, Act Local: Best Practices around the World." Various sessions and presentations were conducted on the effort for regional problem solving oriented improvements from a global perspective. Apart from the US participants, experts from Africa, China, South Korea, and Japan gathered to create a meeting for fostering understanding of the conditions of various countries' public health services. Various workshops and presentations, particularly on problem solving oriented collaboration between practitioners and local residents; PHN approaches for immigrants, homeless people, and the poor; various cultural background adjusted and health promotion oriented efforts; sexually transmitted diseases in young people; and life-style related diseases, abuse related issues, and PHN education. These themes have also become significant in Japan. The conference was a great learning opportunity for me, particularly in relation to the future efforts of PHNs in Japan.

The academic meeting included oral presentations. As I participated as an oral presenter for the first time in this conference, the meeting was a major stage for me. However, through sharing opinions and watching the presentations of other participants, I appreciated the meeting for helping me decide my future directions and solutions to pressing problems.

## **Guideline for Public Health Nursing Practice at the Community Level**

(An excerpt from Part 1 of the Guideline)

Part 1. The fundamental direction of community health activities by PHN

### **(1) Implementation of the plan-do-check-act cycle (PDCA cycle) based on community health diagnoses**

PHNs provide health services and standards in practices at the district level. In addition, they are required to understand the health statuses of community people and living environments based on evaluation studies and statistical information; they then analyze the elements that constitute health needs. By clarifying health needs occurring in a community, they could set the priority of health needs. In addition, based on the PDCA cycle, public health-related measures and their evaluation are developed and implemented.

### **(2) Shift in perspective from individual needs to community needs and practice development**

PHNs grasp not only individual's health needs but also community health needs, in a comprehensive manner, as well as health-related measures based on community characteristics. In addition, they connect community people with related organizations for solving health needs, promote people's independent actions of applying self-help and seeking mutual assistance, and support a continuous community based approach.

### **(3) Emphasis on preventive support**

PHNs are responsible for preventing the onset or worsening of lifestyle-related diseases in residents. In addition to preventing dependent medical care and disability states, they are required to foresee potential health problems related to abuse, to provide important information for residents, and to conduct early intervention.

### **(4) Strengthening of practice from the view of community-based practice**

To support healthy and high-quality of life for community people, PHNs must be actively involved in their district by creating home visit, health consultation, health education, and community organization activities. Through community-based practices, they can grasp the actual lifestyle conditions of community people as well as the factors involved in health needs.

In addition, the creation of social capital is planned through community-based practice. PHNs cooperate with community people by using this resource. They support individual's self-help and mutual assistance schemes, and then promote independent and continuous health promotion.

### **(5) Promotion of district assignment system**

PHNs determine district assignment across sectors. They grasp the health needs of community people, households, and an entire community through health practices under a district assignment system framework. They act as important support coordinators to address health needs in the households and the community comprehensively and across sectors, as well as promote health practices in the community of their responsibility.

### **(6) Healthy community promotion based on community characteristics**

To support health promotion, PHNs create social capital. They plan extensive cooperation with related organizations such as schools and business settings. They strive toward the improvement of the social environment, and promote the creation of healthy communities based on community characteristics.

### **(7) Department cross-sectional cooperation and collaboration in health practice**

In addition to planning mutual cooperation, PHNs carry out health practices by cooperating and collaborating with staff members from other departments of their local health units, related organizations, and community people. Furthermore, they share problems beyond sections and departments if needed. They analyze health needs based on an orientation of health needs solving, and they cooperate and collaborate with other departments and across sectors.

### **(8) Construction of a community care system**

To allow community people with health needs to thrive in life, PHNs are required to adjust their services comprehensively, including public health, medical care, welfare, and nursing care. In addition, they address the lack of service as well as construct a community care system.

### **(9) Development and implementation of various health medical care welfare plans**

To solve community health needs, PHNs cooperate with community people, related individuals, and related organizations. Apart from determining various

health medical care welfare plans (health promotion, preventive measures against cancer, moderation in health-care cost, specific health checkup implementation, maternal and child health, welfare for people with disabilities, long-term care insurance service support, long-term care insurance services, and medical programs), PHNs carry out appropriate and effective progress management and evaluation of various health care, medical care and welfare plans in cooperation with related individuals and organizations.

#### **(10) Development of human resources**

To render appropriate services, PHNs are required to carry out self-development independently. In addition to acquiring the knowledge and learning techniques related to the latest health care, medical care, welfare, and nursing care, they are also required to learn cooperation, coordination and administrative management, and the capability for health care, medical care, welfare, and nursing-related human resource development.

Notice: English translation by JACHN

### **Current Research Vol. 16(1)-(3) of JJACHN**

#### **Vol.16 (1)**

##### **Preface**

Kiyomi Asahara: Obligation and Collaboration of Authors: Reviewers and Editors in a Review Process for Development of Community Health Nursing Science. 16(1): 3, 2013.

##### **Original Articles**

Yuuko Doi, Masaue Ueno, Kyoko Izumi: Relationship between the Residential Environment and Domestic Falls by Elderly Women. 16(1): 4-11, 2013.

##### **Preliminary Reports**

Taichi Narita, Yuko Uda, Keiko Kobayashi: State of Measures against Natural Disasters at Community Comprehensive Support Centers in Shin'etsu Area. 16(1): 12-19, 2013.

Miki Marutani, Yuko Amamiya, Shoko Tsuruoka, Misako Miyazaki: Culturally Sensitive Health Counseling to Prevent Lifestyle-related Diseases Used by Public Health Nurses in Suburban Settings of Japan. 16(1): 20-28, 2013.

Itsuko Ozaki, Michiko Konishi, Emi Matsuura: The Effects on Workers' Lifestyles of Using Web-based

Health Guidance Intervention. 16(1): 29-39, 2013.

Junko Fujita, Minako Watanabe, Sakiko Fukui: Home Care Nurse Collaborative Practice with Care Managers / Home Health Aides for Elderly in Terminal Stage. 16(1): 40-47, 2013.

Yasumasa Adachi, Masaue Ueno, Kyoko Izumi: Factors Related to Workers' Depression in Small and Medium-sized Workplaces. 16(1): 48-55, 2013.

##### **Community Health Nursing Reports**

Yukiko Kanaya, Ayumi Kono, Chieko Tsumura: Evaluation of the Home-visiting Nurse's Home-care Consultation Program at the Hospital. 16(1): 56-62, 2013.

##### **Information**

Fumiko Okamoto, Yumiko Nakamura: Bereavement Reactions and Coping of Bereaved Family Caregivers for End-of-life Cancer Patients at Home. 16(1): 62-69, 2013.

#### **Vol.16 (2)**

##### **Preface**

Reiko Okamoto: Recommendation to Continue the Reflective Practice from the Beginning of Professional Education. 16(2): 5-6, 2013.

##### **Original Articles**

Tomoko Yamabe, Etsuko Tadaka, Yuka Dai: Cognitive Social Capital and Related Factors in Junior High School Students Living in Urban Areas. 16(2): 7-14, 2013.

Mai Yamanoi, Etsuko Tadaka, Rie Hakamada-Taguchi: Factors Related to Nutritional Status in the Community-dwelling Elderly. 16(2): 15-22, 2013.

##### **Preliminary Reports**

Ayako Atsumi, Yukiko Anzai: Cooperative Behaviors of Public Health Nurses When Providing Health Services to Individual Patients. 16(2): 23-31, 2013.

##### **Community Health Nursing Reports**

Emi Kunori, Yukiko Kanaya, Ayumi Kono: Evaluation of the Effectiveness of the Program and Trial to Educate Local Residents Regarding Self-neglect among the Elderly. 16(2): 32-38, 2013.

##### **Information**

Yumiko Yamaji, Fuki Okoshi: Difficulties Experienced by Public Health Nurses in Providing Initial Support to Elderly Patients with Tuberculosis. 16(2): 39-46, 2013.

Masako Kageyama, Atsuko Taguchi: Child-raising

- Support Skills Provided by Public Health Nurses for Mothers with Serious Mental Illness. 16(2): 47-54, 2013.
- Mitsuko Shimizu, Hisako Izumi, Kyoko Namikawa: Actual Support of Public Health Nurses for Families Needing Continuous Support for At-risk Mother and Child. 16(2): 55-62, 2013.
- Yatsuko Kinjyo, Hiroyo Hatashita, Shiho Kawata, Naoko Uemura, Makiko Martinez: The Life Skills of People in Advanced Old Age Living Alone to Live Functional Decline on Remote Islands. 16(2): 63-70, 2013.
- The 16th Annual Conference of JACHN : Presidential Address**
- Toshiko Tada: Share of Power to Support the People Living in the Community. 16(2): 71-75, 2013.
- Committee Reports**
- JACHN Education Committee: Public Health Nursing and Community Health Nursing. 16(2): 76-80, 2013.
- JACHN Project for Improvement of Disaster Relief: Radiation Health Effect and Health Care Management for Residents. 16(2): 81-90, 2013.
- Vol.16 (3)**
- Preface**
- Ayumi Kono: Health and Social Capital in Community. 16(3): 3, 2014.
- Review Article**
- Kyoko Yoshioka-Maeda: A Comprehensive Review of Related Literature Focusing on the Program and Project Development by Japanese Municipal Public Health Nurses (from 2001-2013). 16(3): 4-12, 2014.
- Research Reports**
- Junko Yoda, Etsuko Sato, Mie Izumune, Yuki Suda, Narumi Ide: The Structure of the Difficulties and Issues experienced by Visiting Nurses in Their Cooperation with Care Managers: Focus Group Interviews with Visiting Nurse Managers. 16(3): 13-21, 2014.
- Kyoko Aoyama, Yuuko Kunii, Satoko Yanagisawa, Miho Ishizaki, Kayoko Furuta, Kiyomi Sakuma, Maiko Motoki: Support Process of Public Health Nurses for Foreign Children with Special Health Care Needs (CSHCN) and the Factors Affecting to Its Progress. 16(3): 22-31, 2014.
- Miho Hamayoshi, Ayumi Kono: Reliability and Validity of the Advance Directive Knowledge Test and Attitude Survey for Japanese in Local Older Residents. 16(3): 32-40, 2014.
- Chisato Hayashi, Kazuo Hayakawa: Study on Factors Predicting Fathers' Participation in Childcare. 16(3): 41-52, 2014.
- Hitomi Matsuura, Mariko Nishijima, Yukari Hoshita: A Development of Scales Illustrating How Public Health Nurses Nurture the Social Capital for Suicide Prevention. 16(3): 53-64, 2014.
- Junko Goto, Takiko Hosoya, Atsuko Kobayashi, Yuka Kanoya, Mariko Ohtake, Yuko Morikagi: Factors Associated with Functional Capacity Decline Risk over a 6-year Period among Independent Elderly Persons Living in the Community. 16(3): 65-74, 2014.
- Community Health Nursing Report**
- Minori Tanaka, Akiko Kanefuji, Mie Okuda, Michie Nomura, Reiko Okamoto; Kiyoko Miyauchi: Arising Changes among Public Health Nurse in Administrative Management Positions by Support Compiling Portfolio. 16(3): 75-81, 2014.
- Informations**
- Yuko Ushio, Mitsuko Matsushita, Rie Iino: Educational Priorities When Teaching Community Diagnosis Identified by the Nurse Faculties among Different University Nursing Programs. 16(3): 82-89, 2014.
- Chie Kawasaki: Birth and Child-rearing Experiences of Immigrant Women in Japan and Their Support Needs: A Literature Review. 16(3): 90-97, 2014.
- NEWS FROM JACHN**
- 16(3): 98-106, 2014

## Announcement of the 17th Annual Meeting of the JACHN

**Date:** August 2–3, 2014

**Venue:** Okayama Convention Center, Okayama City, Okayama Prefecture



### Greetings:

**Reiko Okamoto, Ph. D, RN, PHN**

President of the 17th Annual Meeting of the Japan Academy of Community Health Nursing

Department of Nursing, Graduate School of Health Sciences, Okayama University



Reiko Okamoto, Ph. D, RN, PHN

The two-day 17th Annual Meeting of JACHN will be held from August 2 to 3, 2014, at the Okayama Convention Center, Okayama. The main theme will be “Action research on the heritage and innovation of community health nursing.”

In addition to giving nursing care for the health and welfare of people, with the heritage of wisdom and culture, community health nurses are action researchers who introduce innovative or needed changes.

In the 17th annual meeting, with a main theme of action research in community health nursing, the programs aim to impart practices in the methods used and visualization of real-world conditions. Through this meeting, I encourage all participants to experience the aspects of action research involving “solving problems occurring in actual practice” and “collaborating between citizens and researchers.”

The meeting will coincide with the Okayama Momotaro Festival. Participants can enjoy a direct view of the fireworks during the social gathering, during which a course is prepared so guests can enjoy the tastes of Okayama. We look forward to your participation.

We are very excited to meet everyone in August 2014, to gather for practice and research on community health nursing, and to engage in mutual exchange. This meeting can serve as a fresh break from daily practice, and therefore we welcome you all to participate. I thank you in advance.



## Program:

### Keynote lecture

Shigeru Saganami, The head of the group

*The Association of Medical Doctors of Asia (AMDA)*

Title: The action of mutual aid based community: the history of primary care promotion in Okayama and the international emergency humanitarian aid for 30 years

### Symposium

Title: The heritage and innovation of Aiiki committee activities: the history from the overnight stay home visit by public health nurses for 60 years in Aiiki village

Emi Oba, Department Director

*Imperial Gift Foundation Boshi-Aiiku-Kai*

### Special lecture 1

Katsuya Yamori, Professor

*Research Center for Disaster Reduction System, Disaster Prevention Research Institute Kyoto University*

Title: To regional contribution by outcomes of the action research: the Crossroads produced by Hanshin Awaji great earthquake disaster

### Special lecture 2

Yumi Tamura, Professor

*Graduate School of Health Care Sciences, Jikei Institute, Translator of "Reflective Practice in Nursing"*

Title: Reflective practice to improve the specialty of community health nursing

### Special lecture 3

Tetsuya Kimura, Historian

*Author of "In Times of Resident Public Health Nurse System"*

Title: Suggestions for community health nursing and home care

#### Day 1 (Saturday, August 2, 2014)

- Opening remarks and orientation
- Presidential lecture
- Seminar organized by the Board of Directors
- Keynote lecture
- Public symposium
- Poster session
- Workshop
- Exhibition/exchange

#### Day 2 (Sunday, August 3, 2014)

- Special lecture
- Poster session
- Workshop
- Exhibition/exchange
- Closing ceremony



Publisher: Committee for Promoting International Exchange Activities

Emiko Saito (Tokyo Metropolitan University), Takako Ishihara (Gifu University),  
Shizuko Omote (Kanazawa University), Kanako Murata (Showa University), Chu  
Hyang Oh (Tokyo Metropolitan University)

Graduate Schools of Human Health Science, Tokyo Metropolitan University

7-2-10, Higashiogu, Arakawa, Tokyo, 116-8551, JAPAN

Phone & Facsimile +81-3-3819-7418 Email:saito@hs.tmu.ac.jp