
NEWS FROM JACHN

Topics of Japanese Community Health Nursing

1. Current Status and Issues of ICT Application on Community Health Nursing in Japan

1) Takashi Naruse

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Because of the covid-19 spread and technology development, community health nurses are required to use Information and Communication Technologies (ICTs) actively. ICT is a generic term for technologies that utilize computers and networks for exchanging information. It has been becoming very convenient and more accessible. In Japan, the Basic Act on the Formation of an Advanced Information and Telecommunications Network Society was enacted in 2001. The purpose of this law is “to promote measures for the formation of an advanced information and telecommunications network society in a prompt and focused manner.” The advanced information and communication network society is described as a society in which creative and dynamic development in all fields is possible through the free and safe access, sharing, and dissemination of diverse information and knowledge on a global scale via the Internet and other advanced information and communication networks. The active use of ICT will become even more

essential for community health nursing activities that support the people who live and work in various backgrounds. Here are three issues concerning the application of Community Health Nursing in Japan.

1. The implementation of advanced ICTs is not widely enough used in community nursing activities. Textbooks/guidelines emphasized the importance of the PDCA cycle with timely data management and analysis for evidence-based nursing. However, in clinical settings, a system for importing and storing data has not been sufficiently adopted especially in the area of public health nursing. The information exchange between departments and organizations appears to depend on paper-based communication or through direct conversation. My hypothesis is that a vague concern about the leakage of personal information delays active ICT use. Many people cannot imagine that a high-security cloud server might be safer than putting papers in secured lockers to safeguard individual information. There are some institutions that have already introduced an advanced ICT system. Dr. Kikuchi introduces one example in another part.

2. Communication relies on human relationships with community members. Nurses need to communicate with community members to provide appropriate care. Their practices are implemented within a small to a medium-sized group of people. The relationships among them could probably affect the outputs and outcomes. Many nurses would think that face-to-face interaction is essential to developing human relationships. While that may be true, there could be any tasks that can be done without relying on a well-developed relationship. We should

clearly structure our tasks from the perspective of ICT use.

3. Nursing practices in/for online communities. There are many new communities that have emerged in the world of social networking sites (SNSs), no longer being defined by geography, social position, or race. With the spread of the metaverse, the interface between people and society will become less directly invisible. We can use SNSs as new resources in nursing care. It is also necessary to discuss how to utilize our techniques to solve/prevent health problems in SNS communities. As an example of my practice, I opened my own websites and developed online peer learning activities for health care providers/clients (<https://takanaruse.com/en/>).

2) Hiroyuki Kikuchi

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Community-dwelling psychiatric patients are sometimes unable or unwilling to recognize the need for treatment on their own. In such cases, family members or close relatives are often the main ones who encourage them to seek treatment or sometimes assist them in accessing it. However, in some cases, time passes without such support, resulting in worsening of symptoms or involuntary hospitalization. In order to prevent such situations, community health nurses play a role in providing early treatment support to patients living in the community who need treatment.

These supports are provided by public health nurses working in public health centers. Nurses collect a variety of information, including the presence of psychiatric disorders, severity of illness, comorbidities, medical history, risk of self-injury or other harm, family relationships, economic status, and relationships with neighbors. Carefully interpreting this information, which changes from

time to time, public health nurses provide support at the right time and in collaboration with a wide range of medical and welfare professionals.

At the Public Health Centers in Tokyo Metropolitan Government, all of these support records were managed by paper medical records created for each patient. However, there were several problems with the paper-based medical record. The first is that it is not easy for public health centers to understand the characteristics of the entire population they are supporting. For example, if you want to know how many patients have attempted suicide in a year, you have to pick up all the medical records and count them, which is a very time-consuming task. The second point is that the type of information known about each subject differs. There is a limit to the amount of information that can be included in a paper medical record. In order to support the subject appropriately, the public health nurse selects the information with the highest priority and describes it. For example, even if they want to know if a patient is receiving public assistance, there will be a mixture of cases where the information is listed and cases where it is not listed (i.e. unknown).

In 2016, the Tokyo Metropolitan Government replaced its previous paper medical records with an ICT-based electronic medical record system. The benefits of this system include reduced time for record keeping, ease of management, and easier information-sharing with headquarters. One notable benefit of switching from handwritten to electronic medical records is that it has become easier to revise the medical records, which in turn has improved the quality of the records. This was especially beneficial for the novice nurses.

In addition, electric medical record could contribute to scientific evaluation of the support provided by nurses. For quantitative evaluation, the first step is describing the characteristics of the population, i.e., the target group to be supported by

the health center. The number of new cases within the past year, the ratio of males to females, the age structure, and the total consultation response time can be quickly calculated by the system. Furthermore, the information can be uniformly collected by including check-box type input items on the page for each individual patient. It may also be possible to conduct analyses using events such as death and involuntary hospitalization as outcomes to evaluate the effectiveness of the support provided by public health nurses.

In the future, as more ICT is introduced in these health centers, improvement via scientific evaluation is expected, that is, more evidence-based practice would be provided widely in Japan.

3) Hideaki Kanai

Japan Advanced Institute of Science and Technology

Currently, Japan is rapidly aging. Japanese government agencies report that the percentage of elderly people whose ages are at least 65 years will increase up to about 30 percent in 2025. As one of the measures towards this situation, the community-based integrated healthcare system will be introduced in Japan. The system aims to provide elderly people living at home with appropriate health, medical, and welfare services. For the system to succeed, all stakeholders should share with each other any information about the situations of the elderly population living at home.

In spite of this, information on older people is not shared among divisions and is not available. For example, hospitals manage the elderly population with electronic medical records, while nursing center records use other systems, and community centers are managed using paper. In-home scenarios, most cases do not record information. As a result, it becomes difficult to grasp the status of the elderly

population properly, and it becomes impossible to intervene/provide care services for the elderly people at the appropriate time.

We try to solve these issues by using an information-sharing system as an ICT system. Based on interviews of stakeholders in a regional healthcare system, we have developed a supporting system for sharing information about the elderly at home among families, medical professionals, and nursing care centers. The system supports multi-professional collaboration for in-home care by the following functions:

- The function of sharing information about elderly individuals' situations.
- The function of sharing messages
- The function of alerting about changes in the elderly individuals' statuses.

In sharing information about elderly individuals' situations, users can input and access the shared items mentioned above. To make it easier for users to enter and confirm the status of the elderly individuals, the information is displayed and shared in four stages: "emergency," "caution," "attention," and "normal." Users can also trace the history of these statuses. In the function of sharing messages, users can communicate by sending messages, such as SNSs. Users get to know the state of the elderly individuals through shared items and advice and instructions from others. Users can also attach image files to each message to enable the sharing of handwritten care record documents, images of diseased areas, and activity.

To evaluate the system, we conducted a field test in Nomi city, Ishikawa Prefecture, Japan. According to an analysis of the system usage logs and an interview survey, the information-sharing system was effective in reducing the burden on professionals such as care managers and improving efficiency. It was also found that active information sharing by professionals promotes activities related to the confirming and inputting of messages for the

family members of elderly individuals. Additionally, the elderly people were aware that the stakeholders were watching over them carefully, and this awareness had the effect of making their daily lives more regular. From these results, we consider that the use of this system makes it possible to share information that was previously difficult to share among all the stakeholders and demonstrates the possibility of promoting the health of the elderly individuals themselves.

2. Best Research Awards of Japanese Community Health Nursing

1) The Development of Self-assessment Scales of Partnership Activities between Public Health Nurses and Nursery Teachers on Their Support to Parents of Children of Concern



Toshiko Otsuka
*Sugiyama Jogakuen University,
Department of Nursing*

Purpose: The purpose of this research is to develop self-assessment scales measuring partnership activities between public health nurses and nursery teachers on their support to parents of children of concern.

Method: We drew up the draft of scales (31 items) by analyzing the interview data of public health nurses and nursery teachers and sent questionnaires to 248 public health nurses and 881 nursery teachers in nine cities in order to test their reliability and validity.

Results: A total of 940 (83.3%) questionnaires were returned, among them 773 were valid. Four items were excluded from the draft of scales through item analysis. Then, the optimal solution of six factors and 25 items was obtained by exploratory and

confirmatory factor analyses. Six factors were as follows: “exchange of information useful to mutual support,” “opportunities and relationship associated with the type of each job,” “the understanding of the type of each job and social resources and its use,” “care for the approval of guardians on information sharing and the exchange of support consequences,” and “refinement of affiliated institutions’ rules on information sharing.” These results satisfied good internal consistency, and construct validity, confirming their reliability and validity.

Discussion: In this research we developed “self-assessment scales of partnership activities between public health nurses and nursery teachers in their support to parents of children of concern” which comprises six factors and 25 items whose reliability and validity were confirmed. This scale is expected to be used for self-assessment partnership activities between public health nurses and nursery teachers. [Key words] partnership activities, public health nurses, nursery teachers, developmental disorders, parents, self-assessment scales

2) The Process by Which Alcoholics Maintain both Employment and Abstinence; Social Interaction by Members of Danshu-Kai Who Have History of Hospital Treatment



Yukiko Sano
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Daito Trust Construction Co., Ltd*

Objective: This study aimed to clarify the process by which alcoholics maintain both employment and abstinence, and consider support methods.

Method: Semi-structured interviews were conducted with 9 alcoholics who are members of Danshu-Kai (an alcohol abstinence group) and data were analyzed using a modified grounded theory approach.

Results: “A person who is being manipulated by alcohol” selected hospitalization for an “edge of the cliff decision” and participated in “Danshu-Kai to ease my loneliness”.

Although they had a “workplace that supports reinstatement” they experienced “difficulty with reinstatement”. Under these circumstances, they were constantly performing “self-activation to prevent alcohol relapse”. They became “reborn”, taking on a “way of working like oneself” because “I want to cherish my family”.

Furthermore, “self-activation to prevent alcohol relapse” was the central category of the process.

Discussion: This study clarified the process by which alcoholics who are working performed “self-activation to prevent alcohol relapse” and became aware of a “way of working like oneself”. It is important to understand the background of alcoholics who have been drinking for a long time in order to relieve their stress and depressive symptoms. Supporters, including public health nurses, need to continue support to provide for reducing “anxiety about relapse”.

[Keywords] alcoholics, employment, abstinence from drinking, Danshu-Kai, social interaction, process

3) Significance of Community Involvement Experiences of Elderly Men Living Alone in Mountainous Rural Areas in Japan



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Aim: The purpose of this qualitative study was to describe the significance of community involvement of elderly men living alone in mountainous rural areas in Japan, as well as to obtain suggestions for community development in order to prevent social

isolation of elderly men in mountainous rural communities.

Method: The study was designed as a qualitative descriptive approach. Data were collected through semi-structured interviews with six elderly men living alone, who were the primary informants (PI), and nine health and welfare professionals, who were the key informants (KI) in A city in Akita Prefecture, Japan. This study was affiliated with a research institution and informed consent was obtained from the participants.

Results: The study identified five categories that described the significance of involvement with the community of elderly men living alone in mountainous rural areas: “Male tendency produced in the community,” “Grounds for drawing boundaries from others,” “Determination to live the remainder of one’s lifetime,” “Heritage of reducing territorial bonding and blood relatives,” and “Acceptance of irresistible nature and declining village.”

Discussion: For the development of mountainous rural communities, they as individuals are not only receivers but also leaders of community development; thus, it is necessary to create opportunities for their participation in the community. Also, it is necessary to promote the transformation of the sense of values and the culture of their families, neighborhood, village, and even administration, in order to prevent social isolation of the entire mountainous rural community.

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

1) Overview



Reiko Okamoto
*President of Joint Conference (6th GNPHN)
Professor, Osaka University Graduate School of Medicine, Section of Public Health Nursing*

10th Annual Conference of Japan Academy of Public Health Nursing (JAPHN), as a memorial conference to commemorate the 10th Anniversary of JAPHN was held jointly with the 6th International Conference of Global Network of Public Health Nursing (GNPHN) on January 8 to 9, 2022 from Osaka, virtually, under the theme of “Stay watchful in health time! Positive health to prepare for risks, so as to protect LIFE.”

The term “LIFE” in this theme implied “life,” “living,” “production,” and “right to live” according to the wisdom of our ancestors involved in public health. The core mission founding the basis of all professionals engaged in public health nursing, including public health nurses, is to protect the “life” of people. In the real world, there exist many foreseeable as well as invisible risks and in fact, we may suddenly encounter a risk. That’s why we need to stay watchful in time of health to predict potential risks so that we can take appropriate action to handle them once they occur. At that time, taking full advantage of the specialty of our profession, we not only focus on the negative aspect by working hard to “eliminate harmful things” but also focus our attention to the positive aspect by making things “move in positive directions.” It is our specialty as public health nurses to work together with communities, placing importance on “together,” “with others,” and “with fun”.

For the purpose of reinforcing the confidence and pride with which we protect the life of people, the programs provided at this jointly held scientific conference focus on the theme of “Positive health to prepare for risks, so as to protect LIFE” that is widely applicable to a variety of sciences from the field of maternal and child health to the area of health risk management. The number of participants exceeded the initial target of 1300. Although the number of participants from overseas was small, the number of Japanese participants in GNPHN was more than 400, far exceeding our earlier

expectation. The fact that so many graduate students challenged to do oral presentations in English was solid evidence of the progress of globalization in Japan.

I am convinced that this jointly held scientific conference has once again confirmed our expertise and nourished our energy and spirits towards the future. History has witnessed that professionals engaged in public health nursing, including public health nurses, have acted day after day to take care of people who live under totally different social situations and are in individually different health conditions, with the aim of making their health better. These activities have steadily improved with their own creativity and originality to provide professional services for people from the cradle to the graveyard. We have taken over their spirit and are continuously improving our activities according to changes in society. We will keep moving forward and will never stop our progress.

2) Brief Reports of Participants

(1) Aya Tagawa, Yuka Higashijima, Rise Watanabe

Osaka University Graduate School of Medicine, Section of Public Health Nursing

This was our first time to attend an international conference. The theme, positive health, was so interesting, and we were very excited before the conference started.

During the two days of live streaming, we learned about the activities in Covid-19 by public health nurses in various countries, maternal and child health, mental health, and a wide range of other fields, and we were deeply touched by our colleagues active around the world. By comparing Japan with the world, we were able to realize the strengths and challenges of Japan, and we learned the importance of learning about the activities of not

only Japan but also other countries.

In the general presentations, we came into contact with a wide range of new findings from Japan and abroad and received multifaceted opinions through the question-and-answer session in English. It was a meaningful opportunity for us to reconfirm the positions of our own research.

At the online exchange meeting, we danced Zumba and sang songs together with the organizers and participants. Through the exchange, we felt the connection with public health nurses around the world, which warmed our heart and bodies.

As the members of Osaka University, the host of this conference, it was also a very valuable experience for us to be involved in the planning of the exhibition. Through the process of creating it, we were able to touch on what Dr. Hiroshi Maruyama left behind and learn the essence of what it means to protect people's "lives".

Through this conference, we were able to deepen our understanding of what public health nurses should be as professionals. We would like to continue to keep in touch with new knowledge from around the world through this network, and to carry out highly professional practice activities.

(2) Akari Maeda, Mana Shirouchi

Department of Community Health Nursing, Division of Health Sciences and Nursing, Graduate School of Medicine, The University of Tokyo.

We participated in the 10th annual conference of Japan Academy of Public Health Nursing and the 6th International Conference of Global Network of Public Health Nursing, which was held jointly. The theme of the conference was "Stay watchful in health time! Positive health to prepare for risks, so as to protect LIFE."

It was held on January 8-9, 2022, in Osaka, Japan, and distributed online.

Participants were gathered from various

countries.

The program covered various topics related to communities and people at all life stages and health levels.

We attended the workshop as an audience.

Through the workshops, we learned two things.

The first thing was the implementation of human resource development under COVID-19 situation, such as what was the difficulties experienced by public health nurses and what they have learned through this tough situation. In addition, we understood the necessary capability of public health nurses during the situation.

The other one was how public health nurses can collaborate effectively with occupational health, medical, and welfare services, which the COVID-19 pandemic forced us to think about.

We also exchanged opinions in small breakout groups (Zoom).

The participants came from various backgrounds such as occupational health nurses, public health nurses, University staff, and others.

Their enthusiasm for public health nursing and research was powerful.

It was a valuable opportunity to listen to the current situation of public health nursing during COVID-19 pandemic from practitioners in the field.

We also learned that it is necessary to build a foundation for collaboration in the community at health times and to create a better system in which each relevant profession can utilize its own role and position to prepare for risks.

The main program lectures, general abstract presentations, and special exhibitions could be viewed on-demand as many times as desired until January 31, which was a fulfilling program.

We look forward to the day soon when COVID-19 epidemic is over, and participants can interact face-to-face with each other.

(3) Yui Fukuda

Keio University Graduate School of Health Management

The 6th International Conference on Global Network of Public Health Nursing (GNPHN) was held virtually held in Osaka, Japan. It was also jointly held with the 10th Annual Conference of Japan Academy of Public Health Nursing (JAPHN), which allowed GNPHN participants to participate in both international and domestic programs.

The live stream programs were held on January 8th – 9th. Various topics concerning Covid-19, public health nursing practice, community development, maternal and child health, mental health, and more were discussed during the live sessions.

I was able to participate in all joint programs and most of the main international and domestic live sessions. I was especially interested in the joint symposium which focused on the situation and reaction towards Covid-19 in different countries. Also, I was able to participate in a workshop

concerning the health of foreign residents in Japan. Since I myself presented a research report regarding the mental health of immigrants in the GNPHN, it was a great opportunity for me to exchange opinions and information with other members of the public health nursing community.

On-demand programs were also accessible from January 4th – 31st. Having the opportunity to participate in both live stream and on-demand programs was very satisfying for me. From this, I was able to grasp the dynamic atmosphere of the live sessions, and also composedly look into the on-demand presentations during my spare time. In addition, communicating by chat was very convenient. It made it easier for me to ask and answer questions, since I haven't had much experience in attending academic conferences in the past.

Overall, participating in the 6th GNPHN was an exciting experience for me to discover new knowledge and perceptions of public health nursing and I am looking forward to the coming 7th GNPHN in Calgary, Alberta, Canada.

The 25th Annual Research Conference of JACHN

Main Theme : A Profession of Community Nursing to Support the Health and Wellbeing of Community Members

- Building an Environment to Facilitate Where People and Their Families Can Live Normal Lives -

Date : August 27-28, 2022

Venue : Toyama International Conference Center, Toyama City

Chairperson : Sugako Tamura (Academic Assembly, Faculty of Medicine, University of Toyama)

Program :

◆Chairperson's speech: Sugako Tamura

Community health nursing for supporting the people and their family in daily lives.

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

Website : <https://jachn25.yupia.net/index.html>

Conference Advertising

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

Main Theme: Community Nursing Towards Sustainable Health

Date : June 21-22, 2022

Venue : Linnaeus University in Vaxjo, Sweden

Website : <https://lnu.se/en/communitynursing2022>

<https://www.qni.org.uk/news-and-events/events/icchnr-conference-2022/>

The 7th International Nursing Research Conference of World Academy of Nursing Science : WANS

Main Theme: Nurses Together for Global Challenge

- Leading Nursing Science and Knowledge Generation Post Global Pandemic

Date : October 18-19, 2022

Venue : Taipei International Convention Center, Taipei, Taiwan

Chairperson: Ching-Min Chen RN, DNS, FAAN (President, Taiwan Nurses Association; TWNA)

Website : <https://twana2022.org/7wans/>

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