

## **Relevance to Education and Practice:**

### **1. Background that led to the translation and current literature selection**

In response to the invitation from Dr. Eklund serving on the board of the Council of International Neonatal Nurses (COINN), Dr. Konishi, Dr. Nakai and Dr. Ukhara (members of the International Communication Committee of the Japan Academy of Neonatal Nurses, JANN) volunteered to translate the content of the “Global Call to Action” published by the Global Alliance for Newborn Care (GLANCE) into Japanese. Care was given to ensure that the expressions/terminologies were relevant to current language in the Japanese medical and nursing realm, and also clear to patients and families. Dr. Eklund provided additional information regarding the current global issues behind the “Global Call to Action” to assist the translators. The translated Japanese version was presented as a poster at the 29th Conference of JANN in Kagoshima, Japan in November 2019. The journal club at Okinawa Prefectural College of Nursing selected and discussed the “Global Call to Action” to share its mission with the colleagues, both nursing and medicine.

### **2. The differences in the culture of newborn care between Japan and the world**

Upon reviewing the “Global Call to Action,” strengths and weaknesses of the care of the newborn in Japan were discussed. A total of 10 members participated, including the nursing faculty in child health and midwifery, a pediatrician and several nurses.

#### **1) The strengths in the Japanese newborn care**

“Healthy pregnancy” and “Safe and respectful birth” were identified as strengths in Japan. Every pregnant woman has the access to the care and a maternal and child health handbook containing essential health information to prepare for the pregnancy to child care. Upon registration at each municipality, the prenatal care (all 14 visits) and delivery expenses are covered by the public funding. This provision likely contributes to the lowest maternal and perinatal mortality rates in the world. In Okinawa, to ensure the optimal care for any woman and child, the maternity services and NICU services collaborate throughout the prefecture, including the remote islands off the coast of the main Okinawa island.

#### **2) The weaknesses in the Japanese Newborn Care**

The topic of “Parent Empowerment” highlighted the need to increase maternal mental health support at postpartum visits (offered twice during the 1st month free in 17 out of 41 municipalities in Okinawa, and expanding). Early detection of postpartum depression and other mental health issues are critical to the health of the newborns. Midwives in the clinics may become aware of the psychosocial issues, however, adequate training to professionally intervene in these cases is lacking. Limited number of certified counselors or obstetricians with mental health training adds to the complexities.

The “Zero-Separation policy” (nurturing care) was identified as a weakness. Presence of family

members at delivery and on the maternity wards has been implemented, however, sibling visits are limited throughout the perinatal settings. Concerns for infection control is behind this limitation. Universal vaccination has improved the immunization status for most preventable diseases, thus decreasing cases of communicable diseases throughout Japan. Pediatricians reported and are aware that that concerns for pertussis, RSV and flu remain, but the siblings are not the only source of infection. The Zero-Separation policy can be implemented through a carefully designed comprehensive policy to perform health check, or considerations for a private room led by the tertiary medical facilities.

### **3. Actionable items to Education and Practice**

The midwifery faculty team will introduce the concept contained in the “Global Call to Action” in the reproductive health and infant care classrooms. The upper-class students who underwent clinical experience may benefit highly rather than those who have not seen the clinical settings. Some suggested that both men and women should be addressed rather than the emphasis placed on the girls and women in reproductive health in the “Call to Action,” however, the global climate in certain regions where oppression for women exist was recognized. The global gender gap report (World Economic Forum, 2018) shows that Japan is ranked at the 110th out of 149 countries, indicating that Japan has much to improve in the future. The author hopes that JANN will support the initiative by GLANCE to promote the “Call to Action” to the members in Japan at their homepage, through their newsletter and at their future conferences more in depth.

Upon presentation of the poster and sharing the discussion described in this manuscript with the level III NICU nurse manager in Okinawa, the manager displayed the poster at a prominent location of the NICU and expressed the plan to have a lecture and discussion designed for the NICU nursing staff. The knowledge of the eight actions will contribute to the nurses’ reflection upon their own care and to the improvement of the care strategies.

# GLOBAL CALL TO ACTION FOR NEWBORN CARE

GLANCE represents the interests of babies born too soon, too small or too sick and their families. It aims to improve newborn and maternal health worldwide, ensure nurturing care in all settings, and enable every girl, woman and parent to make well-informed choices and decisions during pre-conception, pregnancy and birth as well as during follow up and continuing care after discharge from the hospital.

Therefore, GLANCE calls for action to:



#### Girl's and women's reproductive health

- Provide age-appropriate, standardised, evidence-based and scientifically accurate, comprehensive sexual education for every adolescent and adult
- Ensure that every girl and every woman has access to free health information and affordable health services to support her wellbeing, dignity and self-respect with regards to pre-conception, sexuality, pregnancy and parenthood



#### Healthy pregnancy

- Develop and disseminate knowledge about all topics pertaining to a healthy pregnancy
- Adopt measures to ensure that all pregnant women can access affordable and high-quality healthcare



#### Safe and respectful birth

- Provide every woman with a safe environment, and respectful and supportive care during labour and delivery
- Educate, train and equip healthcare providers to ensure high-quality care



#### Nurturing care

- Provide every baby born too soon, too small, or too sick with high-quality care in all settings for the best start in life to develop to their full potential
- Establish a zero-separation policy in hospitals and provide family friendly facilities
- Promote continuous training of healthcare providers, and offer parental involvement in all aspects of care



#### Parent empowerment

- Value, include, educate, and empower parents as key caregivers of their babies at all times
- Provide access to emotional, psychological, spiritual and financial support to parents



#### Follow-up and continuing care after discharge

- Provide discharge management, follow up and continuing care to children born too soon, too small or too sick or with related health issues to promote long-term health and quality of life
- Provide continuing access to medical, financial, educational, emotional, and psychosocial support to these children and their families in home and community settings



#### Research and data collection

- Identify indicators for developmental and long-term health outcomes, and create assessment tools to allow benchmarking
- Support research for maternal and newborn health, develop and implement clinical guidelines and protocols to ensure evidence-based care, reduce mortality and morbidity, and improve quality of life



#### Framework and Strategies

- Develop and establish national and international frameworks for strategies to minimise risks before, during, and after birth



global alliance  
for newborn care



EFONI  
european foundation for  
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