



Editorial

Investing in the Human Fabric of Healthcare: From Communication to Compassionate Resilience

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Editorial

The current issue of the Preventive Care in Nursing and Midwifery Journal centers on a profoundly human theme: the interdependence among psychological well-being, effective communication, and the quality of care across the lifespan. Each article, in its own right, contributes to an overarching message: healthcare systems thrive when their human foundations are nurtured.

The study by Hatef et al. exemplifies this principle by empirically demonstrating that the communication competence of head nurses, particularly in guidance, empathy, and meaning-making, directly enhances work engagement while mitigating psychological distress among staff nurses [1]. This insight reminds us that leadership development is not merely administrative training; it is emotional labor grounded in relational intelligence.

Similarly, Mohammadian et al. extend the discourse on well-being beyond hospital walls [2]. Their work elucidates how domestic violence and postpartum depression are interlinked through marital satisfaction, highlighting that women's mental health is inseparable from their social ecology. Preventive care, in this context, demands a holistic lens that transcends biomedical frameworks. The relational dimension of health is further echoed in the exploration by Naziri and Hooman of family functioning and emotional expressiveness as predictors of anxiety in adolescent girls [3]. Their findings reinforce that emotional literacy within families serves as a protective buffer during critical developmental years. Meanwhile, Ahmadi et al. remind us that resilience is not an abstract construct but a practical mediator in professional life [4]. By revealing how emotional literacy and quality of life influence nurses' psychological stability and personal relationships, the study underscores the emotional toll of caregiving. It calls for institutional strategies that normalize self-care and emotional support among healthcare workers.

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Attention to human flourishing continues across the lifespan in this issue. Pourrahimi et al. present evidence on the differential quality of life among elderly men and women in nursing homes, underscoring the need for gender-sensitive geriatric care [5]. Mohammadi et al. close the loop by examining early childhood growth determinants, using a longitudinal design that situates prevention at the very beginning of life [6].

Education and emergency preparedness form another essential thread. The study by Abbaaszadeh Mehrabad et al. demonstrates that structured, learner-centered training methods enhance the acquisition of life-saving skills among emergency volunteers [7]. Complementing this, Nikentari et al. identify blood glucose and neurological status as dual predictors of survival in diabetic emergencies—an empirical reminder that precision in acute care is as vital as compassion [8].

Editorial Reflection

When viewed collectively, these findings reveal a conceptual chain of human-centered health: from the biological foundations of child development [8], through psychological resilience in adolescence and motherhood [2, 3], to the emotional and ethical dimensions of professional caregiving [1, 4], and finally to the dignity of aging [5]. Education [7] and acute clinical vigilance [8] serve as operational pillars throughout this continuum.

This integrative lens embodies the preventive philosophy that defines our journal: “To care for health is to care for the human experience that sustains it.”

As Editor-in-Chief, I see in this issue a reaffirmation of nursing’s moral and intellectual core—the commitment to care, communication, and compassion as interdependent forms of knowledge. Future research should continue to bridge these domains, employing interdisciplinary and culturally grounded approaches that illuminate the lived realities of both caregivers and care recipients.

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