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Preventing Care in Nursing Midwifery

Editorial

Issue 3, 2026 at a Glance

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Editorial

Preventive care extends across many settings. It is part of bedside nursing, education and training, hospital practice, and the everyday lives of people managing long-term conditions.

The eleven articles in this issue reflect this breadth. Contributions from Iran, China, Türkiye, and Bangladesh include original research, a systematic review, and a case report.

Taken together, they consider how nurses and midwives can promote health, prevent avoidable harm, and support both the people in their care and those learning to provide it.

Two studies focus on people living with chronic conditions [1, 2]. In a study conducted in Khoy, Iran, Ahmadi et al. found that participation in an eight-week Continuous Care Model was associated with higher adjusted self-management scores among patients receiving hemodialysis.

The differences were observed in partnership, self-care, and emotional management, but not in problem-solving [1]. Mohammadnejad et al. examined patients with heart failure in Tabriz, Iran, and identified associations between disease-related worry, self-efficacy, and several clinical and sociodemographic factors. Their findings point to aspects of care that may warrant attention in future interventions [2].

Three articles consider the experiences of those who provide care and those preparing to enter the profession. Tabatabaei and Pour Mohammad examined group-based cognitive-behavioral anger management training among nurses in Tabriz, Iran.

The study reported improvements in communication skills, resilience, and quality of life, although its small sample calls for caution when interpreting the findings [3].

Azemian et al. compared emotional intelligence among medical and nursing students undertaking clinical training in Bushehr, Iran, and found a statistically significant difference between the groups [4].

In China, Wang et al. assessed artificial intelligence literacy among 250 nursing interns in Henan Province. Literacy levels were moderate to high and were associated with greater use of AI and a stronger willingness to participate in training [5].

Occupational safety and clinical practice are the focus of two further contributions. Based on 17 studies, Kahangi et al. identify individual, organizational, and environmental barriers to personal protective equipment use among oncology nurses, suggesting that nonadherence cannot be explained by individual behavior alone [6].

Li et al. report on the nursing management of continuous autologous bile perfusion in a patient with malignant obstructive jaundice in Wuhan, China.

The case describes the monitoring and safety measures used during care and offers practical information that requires further evaluation in clinical practice [7].

The remaining articles address preventive care in community and population settings.

In Bangladesh, Islam et al. found that 81.3% of 144 adolescents reported regular fast-food consumption; attitude and perceived behavioral control were associated with their intention to consume fast food [8].

Rajabi Pour et al. reported anabolic-androgenic steroid use among 19.3% of 300 male athletes in Ahvaz, Iran. Those who reported using these substances had lower body image scores than nonusers [9].

In Türkiye, Hür et al. provide preliminary evidence that a single peer education session may improve genital hygiene behaviors among health sciences students [10].

Finally, Bayat et al. analyzed 2,873 burn admissions in southern Iran between 2019 and 2023. They reported a decline in in-hospital mortality from 50.00% in 2019 to 15.06% in 2023 and examined factors associated with the risk of death [11].

The studies in this issue vary in design and scope. Several rely on convenience samples, self-reported data, or non-randomized designs, and their findings should be interpreted in light of these limitations. Further research with larger samples and more rigorous designs will help clarify and extend the evidence. Considered together [1–11], these contributions highlight the importance of education, supportive working environments, and focused attention to people at increased risk. We thank the authors and reviewers for their work and hope these articles will inform discussion and encourage further research in preventive nursing and midwifery care.

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