一般社団法人
日本私立看護系大学協会

会報

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会長挨拶

一般社団法人　日本私立看護系大学協会　会長
原　　玲子

会員校の皆様におかれましては、平素から本協会にご協力を賜り、御礼申し上げます。

本協会は1976年に、会員校11校で設立され、2025年度の会員校は211校（大学202校、短大9校）となりました。看護系大学の7割を私立大学が占め、私立大学の看護学教育に対する責任や本協会の役割も大きいものと考えます。

本協会の目的は、「私立看護系大学の教育・研究および経営に関する研究調査並びに会員相互の提携と協力によって、私立看護系大学の振興を図り、その使命達成に寄与し、もって我が国の看護及び看護学教育・研究の進歩発展に貢献すること」にあります。

会員校におかれましては、中央教育審議会答申の「2040年に向けた高等教育のグランドデザイン」に受けて、それぞれの大学の建学の精神、大学独自の教育理念に基づき、その実現を図るために、学修成果の見える教育に取り組まれていることと存じます。

本協会においては、2024年度の特別事業として、「ポストコロナにおける看護学教育推進事業」「看護の魅力発信事業」を実施いたしました。

「ポストコロナにおける看護学教育推進事業」とは、新たな時代に向けた看護学教育の質の維持向上を目的とした特別補助事業です。本事業は140校から応募があり140校に助成いたしました。さまざまな取り組みが企画され、さらなる教育の質向上に向けて、次へのステップの足掛かりになればと存じます。

また、「看護の魅力発信事業」は、看護を志す受験生が減少傾向にあることに危機感を抱き、計画されました。2040年、高齢者の割合がピークになる一方で、生産年齢人口は急激に減少し、社会システムの維持に大きな影響を与える可能性があるといわれ、医療や介護についても、その担い手の不足が予測されています。この事業は、デジタルネイティブ、SNSネイティブのZ世代の生徒さんが、社会的問題やSDGsの達成などに関心を持っていること、高校1、2年生に新たな科目として「総合的な探求の時間」が設けられたことに着眼し、朝日新聞社と連携し、副読本冊子である「探求×SDGs-地域課題解決とキャリア」に、社会的課題と看護の特色のある取り組みを掲載し、2,525の高等学校に配布されました。副読本を利用した学生のアンケートの自由記述に、「自分が今思っていたものよりももっと多くの様々な場面で役割を果たしており、看護の働きがすごいと思った。」「看護師の仕事に興味を持ったことはなかったが、看護師の中にもたくさんの分野に分かれていると知って興味を持つことができた。」等があり、生徒さんにとって、自分自身のキャリアに関わりの深い課題として看護を探求することにつながれば幸いと思います。

さらに、進研アド社と連携し、看護職と看護職の多様な「キャリアデザインに関する広告動画を作成し、（Instagram、TikTok、YouTube）で配信しました。アクセス数が多かったのは「看護を学んだ先の多彩な進路」で、資格を取得した後のキャリアに関心があるように思われました。SNSの配信内容は、本協会のホームページに「看護の多様な可能性」とWebページを公開しました。ベネッセコーポレーションのマナビジョン内の職業検索ページと連携させて、本協会のホームページの会員校情報ページに誘導し、各会員校のWebページへの流入を促しました。

わが国の18歳人口が加速度をつけて減少している中、受験生については、あと数年もすれば、世代はZ世代からα世代となります。α世代は、デジタルネイティブはもちろんのこと、コロナ禍において、義務教育課程にて電子書籍を用いてデジタルで授業を行い、課題をデジタルで提出する、さらにはプログラミング学習を行っている世代となっていきます。本協会は、そうした中高生と進路選択の際のキーパーソンである高校の進路指導の教員や保護者を対象に、看護学を学ぶ魅力を発信するとともに、会員校の広報活動を支援してまいりたいと思います。

今後とも協会の活動にご協力をいただきたくよろしくお願い申し上げます。

新規会員校紹介

植草学園大学　看護学部看護学科

〒264-0007　千葉県千葉市若葉区小倉町 1639-3

看護学部長　**中村　伸枝**

みなさん、はじめまして。令和７年（2025 年）４月に開設した、植草学園大学看護学部について紹介させていただきます。

●創立 121 年の歴史をもつ植草学園に、開設した看護学部です

植草学園は、創立 121 年の歴史をもち、社会の変化や時代のニーズに対応して変化してきました。そのなかで、建学の精神である「徳育」や、専門的な知識や資格をもち、人々の生活を支え共生社会（人がその存在を大切にされ、多様な人と共に生き、すべての人を優しく包み込む社会）の実現に貢献する人材を育成する、という教育観は一貫しています。

近年の人工知能（AI）や情報通信技術（ICT）の進歩は著しく、医療・保健・福祉の領域でも、複雑で多様な課題を解決する手段のひとつとして期待されています。一方で、これらが本当に人々の生活に役立つのか、安全や安心が保たれるかなどを検討していくことも求められます。現代社会のなかで、本学が大切にしてきた相手を尊重することが基盤となる「共生」や、倫理観を基盤とした「徳育」は、ますます重要になると考えます。

●共生社会の実現に向けて看護学の立場から地域社会に貢献する人材を育成します

植草学園大学看護学部は、生命と人権を尊重し、豊かな人間性と高い倫理観をもち、科学的かつ倫理的思考に基づいて主体的に行動できる、専門知識・技術を修得した看護師・保健師を養成します。あらゆる成長発達段階及び健康状態にある人々、さまざまな環境下で生活する人々に対して、その人らしい暮らしを続けていくことのできる地域共生社会の実現に向けて貢献できる人材を育成します。

●地域密着型の教育体制が特徴です

本学部は、千葉県下を中心に多くの看護師を輩出してきた国立病院機構千葉医療センター附属千葉看護学校を、大学教育として発展的に継承することで開設されました。本学に既設の発達教育学部・保健医療学部が築いてきた地域との信頼関係や、千葉医療センターをはじめとする地域医療機関との緊密な連携の下で行う地域密着型の教育体制が特徴です。

●地域共創ケアセンターを活用して多様な人々と学び合います

地域に拓かれた教育研究や大学の社会貢献を推進するために、本学に地域共創ケアセンターを開設しました。本センターは、多様な人々との学び合いを通してヘルスケアニーズを把握し、対応方法の検討や取り組みを行う実践の場であると共に、地域共創ケアⅠ～Ⅲという科目を展開する教育の場でもあります。

本学は、千葉市と包括連携協定を締結しており、令和７年度は、地域共創ケアセンターとの連携項目として、プレコンセプションケアを含む青年期のヘルスケアニーズの把握や、地域住民主体の体操教室や通いの場における支援などに取り組んでいます。

●豊かな教育環境のもとで学修を深めます

主に教養教育が行われる千葉若葉キャンパスは、キャンパス内にビオトープ「植草共生の森」を包含する緑豊かで広々とした環境です。看護学部の学生は、他学部の学生とともに教養を深め、社会人・医療人としての姿勢を培います。また、専門職連携教育を通して互いの専門性を理解し、対象者中心のケアを学びます。千葉医療センター内椿森キャンパスは、千葉医療センターと渡り廊下でつながっており、看護学の講義や演習、そして臨地実習の拠点となります。このように、学習に合わせた豊かな教育環境を有していることも本学部の特徴です。

人的環境も豊かで、看護師や保健師、助産師の実務経験や看護学教育・研究について豊かな経験をもつ教員が、学生に対し看護専門職として生涯にわたり成長していく基盤を作るための丁寧な教育支援を行います。

Upright（誠実な）、**E**ssential（本質的な）、**K**ind（優しい）、**U**nique（個性的な）、**S**ensible（思慮深い）、**A**cademic（学術的な）、**UEKUSA** らしい看護師・保健師を育成します。

別府大学　看護学部看護学科

〒874-0011　大分県別府市内竈 1430

別府大学看護学部は、文学部・食物栄養科学部・国際経営学部に次ぐ 4 番目の学部として開設された、東九州唯一の私立大学看護系学部です。他学部には、人間関係学科や食物栄養学科など看護と関連の深い学科や専攻があり、連携教育を行うことができます。

看護学部は、3 学部のある石垣キャンパスから一駅離れた亀川キャンパスとして、国立病院機構別府医療センターと同じ敷地内に新設され、JR 九州の亀川駅から徒歩 5 分というアクセスです。

本学部は、建学の精神「真理はわれらを自由にする」を基礎として、「生命の尊厳を基盤とした豊かな人間性と倫理観、確かな看護の専門的知識・実践力を有し、時代や社会の変化に伴う地域社会の健康課題について、多職種連携のもと自律的に行動できる人材、あわせて、自己研鑽を続け、看護学の発展に寄与できる人材」の養成を教育目標とします。

入学定員は、看護師課程 80 名（保健師課程 16 名）であり、今年度は 83 名が入学しています。新入生ガイダンスでは、「一つではない答えを探求する看護にやりがいを感じ、自ら必要な知識とは何かを発見し学修する、理論的基盤を持ち創造的な看護をつくりあげる、という活動には“自ら学ぶ力”が必要である」ことを伝えて、看護の学修を動機づけています。

また、学生が興味や関心を持ち続けて、意欲的・主体的、創造的に学修を積み重ねることができるように、常に教育方法のブラッシュアップに努めていく教員組織を目指しています。

学生は、理論を活用した実践、個別性のある質の高い看護について学び、科学的でヒューマニスティックな看護実践力を身につけるため、4 年間を通したシミュレーション教育を基盤とします。そこでは、少人数制のグループワークを基本として、様々なアイディアを活発に交換できる学習環境を整え、主体性と創造性を発揮することができる自由度の高い環境を提供します。学生は、e-book や看護技術の web 教材、電子カルテシステム、シミュレーション演習室の ICT 機器などに親しみ、情報化社会に必要な ICT を駆使できる能力も修得します。

シミュレーション教育の充実に向けては、看護の全専門領域でシミュレーション演習の科目を設定し、領域ごとのシミュレーションルームや協同学習のためのアクティブラーニングルームといった施設・設備を充実させました。高機能シミュレータや、シミュレーションルームと教室を結ぶ動画収録・配信システムも導入しています。そして、全領域の教員で構成したシミュレーション演習ワーキンググループが中心となり、各専門領域が横断的に活用できる患者事例の作成と多彩でリアルなシナリオ作成に取り組んでいます。

看護実践の基盤になるのは、人への深い関心と思いやり、対象を全人的に理解する力、探求心と論理的思考力、行動力、さらに実践を振り返り、その実践が他者の健康や安寧をもたらしたかを評価する力です。このような資質を備えた自律した看護専門職の人材育成に取り組みます。

社員総会付帯事業講演会

「発達障害傾向のある看護学生への合理的配慮」

講師：安酸　史子 氏（日本赤十字北海道看護大学 学長）

7月11日、社員総会付帯事業として「発達障害傾向のある看護学生への合理的配慮」と題した講演会を開催しました。

令和6年4月より、改正障害者差別解消法が施行され、我が国の大学・短期大学・高等専門学校では、従来禁止されていた障害者に対する不当な差別的取扱いに加え、合理的配慮の提供も法的に義務付けられることとなりました。

近年、看護学教育の現場では多様な背景を持つ学生が増えてきています。その中には、発達障害傾向のある学生も存在し、教育の現場では発達障害傾向のある学生の学ぶ環境を整えることが求められています。本講演では、安酸史子氏（日本赤十字北海道看護大学学長）を講師として、発達障害傾向のある看護学生に対する合理的配慮の重要性や対応についてお話いただきました。以下に概要をまとめます。

○ 発達障害とその特性がある人の心理的特性

発達障害は、限局性学習症（SLD）、注意欠如・多動症（ADHD）、自閉スペクトラム症（ASD）、発達性協調運動症（DCD）などが含まれます。学生一人ひとりに対する理解と配慮が重要です。

限局性学習症（SLD）：学習能力の凹凸があり、学生は学びにくさを感じ、自尊感情が低下しやすい。

注意欠如･多動症（ADHD）：集中力や行動上の特性があり、学生は同じ失敗を繰り返すなど、自分を否定的に捉えやすい。叱責により自己肯定感が低くなり、二次障害として抑うつのリスクがある。

自閉スペクトラム症（ASD）：コミュニケーションの質的違いがあり、集団に加わることを好まず、周囲から誤解を招きやすい。具体性のない説明では理解が追い付かず、会話をする際に困惑することが多い。

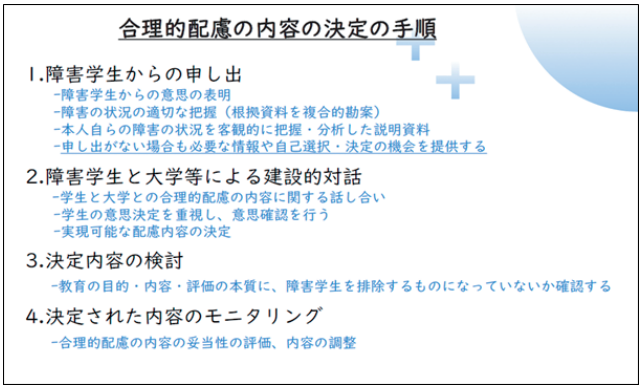
発達性協調運動症（DCD）：看護では細かな作業が多く、また、日々のあらゆる行動に対する不器用さにストレスを感じ、日常生活は疲れやすくイライラしてしまい、最初からあきらめてしまうことがある。

○ 大学等に求められる取り組み

大学等における障害学生支援の取り組みは、学内の体制整備が必要です。施設や設備のバリアフリー化の他に、障害学生支援室などの専門部署や相談窓口を設置し、障害学生への支援に関する意思決定を行う委員会や紛争解決のための第三者組織を設けることで、組織的な支援を強化することが重要です。そのための、私立大学等経営費補助金など必要経費の獲得も忘れてはなりません。また、全ての学生に対する情報公開も欠かせません。学生や保護者、高等学校に対して、支援に関する方針や合理的配慮の申請方法について明確に情報提供を行う必要があります。これにより、学生が自身の権利や支援の内容を理解しやすくなります。

○ 合理的配慮の決定手順と支援の固定化の懸念

合理的配慮の手順は、障害学生からの申し出を受けた後に、学生と大学の建設的対話を通じ実現可能な支援内容を決定します。教育内容との整合性を検討し、個々の特性やニーズに応じ大学に過重負担のない範囲で適切な支援が実現されることが重要です。また、支援内容のモニタリングを行い、柔軟な支援体制を構築することも重要です。



○ セルフアドボカシー：発達障害のある学生の意思表明を促す取り組み

セルフアドボカシー（自己権利擁護）は、自分自身の権利やニーズを認識し、それを主張する能力や行動を指します。自己決定権を尊重するための重要なスキルとなります。発達障害傾向のある学生に対しては、自己理解を促進し、セルフアドボカシースキルを身につける機会を提供することが重要です。大学や支援者との対話を通じて、学生は自らが本当に必要とする合理的配慮を決定し、それを表明できる能力を育むことが重要です。障害のある学生と大学が社会的障壁の除去に向けて講じている対策や、大学が取り組むことができる対策を対話の中で共有し、学生に建設的な対話を通じて自己理解を促すことは大切です。セル

フアドボカシーは学生が自らの権利を主張し、質の高い支援を受けるための重要な手段となります。

○ 支援における発達障害の特性が持つ対応の難しさ

発達障害は複数の特性を併せ持つことが多く、これが対応を難しくする要因となります。また、学生本人が、自分が困っていることを自覚しにくい場合や、どうすればよいかを考え実行するのが難しい場合があり、それが外部から見て不真面目な態度に映ることもあります。困難に直面した際に適切に助けを求めることができないこともあり、こうした特性を踏まえて支援を行う必要があります。さらに、発達障害に関わる二次障害や併存症も考慮する必要があり、これに対しては医療との連携が不可欠なケースも存在します。支援者は、これらの複雑な状況に直面した時に混乱しないようにし、各ケースに応じた柔軟な対応をとることが求められます。支援を行う際には、学内外のネットワークを活用することも大切です。支援を必要とする人々とつながる「人と場」を意識し、支援部署や支援者との連携を強化することで、より効果的な支援を提供することが可能となります。

○ 具体的な事例と対応

●優先順位が分からない：注意欠如・多動症（ASD、ADHD）

例▶ 患者からトイレの訴えがあるにも関わらず、計画していた看護の清拭を実施しようとする。

対応▶ やるべきタスクを紙に書き出し、番号を付けて優先順位を示します（構造化）。これにより、何から始めるかが明確になります。次に、終えたタスクには線を引いて消す方法を教え、メモ帳の使い方を教えます。また、スマートフォンやiPadのスケジュール機能を使うことを勧めることで、タスクの管理が楽になります。周囲の人間が進捗管理に積極的に関わり、課題は一度に一つずつ与えるようにし、複数のタスクが重ならないように配慮します。

●指示されたことができない：自閉スペクトラム症（ASD、ADHD）

例▶ 受け持ち看護師に、患者の清拭準備をしておくように指示されたが、時間になっても何もしていなかった。

対応▶ 指示が正しく理解できているのか確認するため、一緒に内容を再確認します。やってもらいたい内容を具体的にフローチャートやリストにして紙面で渡します。このリストには、「何を」、「なぜ」、「どのように」、「いつまでに」という情報を明確に示し、指示を具体化します。また、こだわりが強く、締め切りが守れないタイプの場合は、途中の進捗を報告してもらうか、こちらから確認する必要もあります。急な指示にパニックになりがちなタイプには、できるだけ早めに予定を伝え、心の準備をさせることが重要です。「分からないことは何でも確認して良い」と伝え、不安を軽減することも大切です。さらに、先延ばしにしないように、今すぐやるべきことを一つずつ指示し、具体的なアクションを促します。最後に、スマートフォンやタブレットのスケジュール機能を活用し、指示を忘れないようにサポートすることが効果的です。

●うっかりミスが多い：注意欠如・多動症（ADHD）

例▶ 実習初日にナースシューズを忘れただけでなく、実習記録も忘れて、遅刻してくる。患者への抗生剤投与を忘れてしまう。

対応▶ 集中力の問題は、周囲の刺激を減らすことで改善できます。忘れ物を防ぐために、大きなカバンに全てをまとめて入れたり、メモ帳やスマートフォンを使ったりして、常に記録を取ることが重要です。メモを取っていない時には指示を出さず、必ずメモをさせます。また、ダブルチェックやトリプルチェックを行い、確認体制を強化します。ADHDの人には、治療薬（コンサータやストラテラなど）が効果的な場合があるため、受診を促すことも有効です。叱責すると焦ってしまい、ミスが増えることがあるので、注意が必要です。

おわりに

大学は、学生が社会に出ていく最終教育機関といえます。そのため、自分の能力を発揮するためにも自分の得意なこと、苦手なことを理解し、必要な時に必要なサポートを他者に求めるスキルを身につけることが、大学生活の中で培われると思います。

発達障害のある学生が学びやすい環境を整えていくことは、どの学生にとっても学びやすい環境になると思います。発達障害のある学生を含め、全ての学生が自分のもっている力を最大限に発揮できるような環境を整え支援することが必要であるといえます。

発達障害傾向のある看護学生への合理的配慮は、学生が持つ特性を理解し、その能力を最大限に引き出すために不可欠です。適切な支援によって、すべての学生に学びやすい環境を提供することは、教育の質の向上に寄与します。学生が自信を持って学び、成長できる環境を整えることは、結果として看護の質の向上にもつながります。大学だけでなく、医療現場や地域社会全体の協力によって達成されるものであり、発達障害傾向のある学生に対する支援が一層重要であるといえます。

2025年度看護学研究奨励賞　論文要旨

Development and validation of scales measuring individual, nursing unit, hospital, and community factors related to fertility intentions of female Japanese hospital nurses

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Aim

This study aimed to examine the psychometric properties of scales measuring individual (nurse, husband/partner, and child), nursing unit, hospital, and community factors related to fertility intentions among female Japanese hospital nurses.

Methods

A methodological design was used. Data were collected via a cross-sectional, self-administered questionnaire survey. Data from 898 Japanese female hospital nurses (aged 20–49) across 50 hospitals were analyzed. The initial scales were developed through semi-structured interviews, literature review, expert evaluation, and a pilot study. Item analysis, exploratory and confirmatory factor analyses, Cronbach's α, and known group validity testing were conducted.

Results

The following six scales were developed: (a) nurse factor: 12 items, four domains (Economic Needs, Timing of Life Events, Nursing Aspirations, and Career Development); (b) husband/partner factor: six items, two domains (Share of Housework and Childcare and Relationship with Husband/Partner); (c) child factor: three items, one domain; (d) nursing unit factor: 13 items, four domains (Guilty Feelings toward Colleagues, Unit Nurse Manager's Management, Workability, and Collegiality); (e) hospital factor: nine items, three domains (Access to Legal Rights, Support for Mothers, and Comfort in Hospitals); and (f) community factor: six items, two domains (Governmental Family Support and Culture of Working Women). All scales except the child factor showed good model fit (CFI > .950, RMSEA < .070). Cronbach's α ranged from .590 (community factor) to .807 (child factor). Nurses with high fertility intentions scored significantly higher on the nurse, husband/partner, and hospital factor scales.

Conclusions

The nurse, husband/partner, and hospital factor scales demonstrated acceptable levels of reliability and validity. However, refining the child, nursing unit, and community factor scales could improve their psychometric properties. These scales have the potential to inform the development of supportive environments that empower individuals to make reproductive choices freely and responsibly while acknowledging and respecting diverse circumstances and preferences.

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Effects of educational methods using extended reality on pre-registration nursing students' knowledge, skill, confidence, and satisfaction: A systematic review and meta-analysis

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Aims: This study examined whether educational methods utilizing extended reality (XR) improve pre-registration nursing students' knowledge, skills, confidence, and satisfaction compared with traditional methods.

Design: We conducted a systematic review and meta-analysis of the effectiveness of XR in nursing education based on the Cochrane methodology.

Data sources: Randomized controlled trials (RCTs) were searched in MEDLINE, CINAHL, ERIC, Web of Science, Cochrane Central Register of Controlled Trials, and Igaku Chuo Zasshi from inception of each database to March 21, 2024.

Review methods: Two authors independently screened study titles and abstracts to identify potentially relevant studies. Subsequently, two reviewers independently assessed the eligibility of the studies based on full-text reviews and extracted the data. They calculated the pooled effect estimates associated with pre-registration nursing students' knowledge and skills, confidence, and satisfaction using a random-effects meta-analytic model.

Results: Among the 1615 records identified, 128 studies were identified. Following full-text evaluation, 38 studies were included in the systematic review. The meta-analysis included 34 studies. XR had significant positive effects on knowledge (N=1926, standard mean difference [SMD]=0.55, 95% confidence interval [CI]: 0.34 to 0.77), skills (N=904, SMD=1.00, 95% CI: 0.46 to 1.54), and satisfaction (N=574, SMD=1.19, 95% CI: 0.09 to 2.30). In particular, immersive virtual reality (VR) had significant positive effects on knowledge (N=707, SMD=0.60, 95% CI: 0.36 to 0.83), skills (N=302, SMD=1.60, 95% CI: 0.70 to 2.50), and satisfaction

(N=406; SMD=1.63, 95% CI: 0.04 to 3.22).
Conclusions: XR may be a viable teaching strategy for improving knowledge, skills, and satisfaction acquisition. In particular, immersive VR improves knowledge, skills, and satisfaction. XR could not be a direct replacement for traditional methods but can complement pre-registration nursing students' traditional education methods.

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＊電子ジャーナルのため、掲載ページの記載なし。

Quality indicators of Supportive Care for Patients with Cancer undergoing treatment: a systematic review

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Patients receive treatment while managing and balancing responsibilities at work and in their families. However, measurement of supportive care indicators related to treatment-related side effects is under-reported. This review aimed to identify a list of quality indicators for managing cancer treatment-induced toxicities for adult patients with cancer. We used the PubMed, the Cumulative Index for Nursing and Allied Health Literature, the Cochrane Database of Systematic Reviews, and Embase to search English articles that developed or analyzed quality indicators of managing cancer treatment-induced toxicities for adult patients with cancer from September 26, 2013 to December 26, 2023. The identified indicators were classified according to Donabedian's model for quality of care in healthcare. Forty-two indicators (4 structure, 27 process, and 11 outcome indicators) in 18 articles were identified. Eight articles (44.4%) were from North America, four (22.2%) from Europe, two (11.1%) from Oceania, two (11.1%) from Asia, and one (5.6%) from Africa; 64.3% of the indicators were process indicators base on guidelines. The prevalence of patient symptoms determined using a patient-reported outcome measure were proposed as an outcome indicator. In seven studies (38.9%), these indicators were selected by multidisciplinary experts, including oncologist, radiologist, and nurses. None of the studies involved patients or family members in the indicator selection process. The quality of supportive care should be improved by measuring these indicators, considering the patient's needs for supportive care at each hospital such that patients can continue their lives while undergoing treatment.

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Characteristics of peripheral intravenous catheter cannulation in older Japanese inpatients

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Age-related physiological changes affect various aspects of peripheral intravenous catheter (PIVC) cannulation. Aging increases the difficulty of vein access, and multiple insertion attempts are often required for successful catheterization. Repeated insertions can degrade vascular walls, complicating subsequent approaches and leading to catheterization failure within a short amount of time. Although the population of older individuals is rapidly growing worldwide, the characteristics of PIVCs, especially in older patients, have been poorly investigated. In the current cross-sectional observational study, PIVC sizes, PIVC sites, the number of attempts until successful insertion, and the degree of venodilation upon insertion among hospital inpatients aged ≥65 years were investigated, along with measurements of the vessel diameter and depth using ultrasound.

Based on an analysis of 91 PIVC insertions in older Japanese inpatients, the mean cannulated vein diameter was 1.8 mm and the most frequently used catheter size was 24-gauge with an outer diameter of 0.7 mm. Most of the catheters were placed at the ideal site on the first attempt. However, considering the optimal vein-to-catheter ratio of 3.3, this implies that most of the cannulations were oversized and would be oversized even when using a 24-gauge catheter. The results suggest that further research regarding the identification of appropriate veins in older inpatients is warranted. In addition, compared with previous studies conducted outside of Asia, obvious differences were found in terms of vessel diameter, catheter size, and catheter sites. Not only age but also body mass index, race, ethnicity, and geographic origin may affect venous status and PIVC insertion. The definition of "appropriate" cannulation approaches might vary among countries.

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Non-pharmacological treatments for anticipatory nausea and vomiting during chemotherapy: a systematic review and meta-analysis of the Clinical Practice Guidelines for Antiemesis 2023

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Background
Anticipatory chemotherapy-induced nausea and vomiting (CINV) is a conditioned response influenced by the severity and duration of previous emetic responses to chemotherapy. We aimed to evaluate the efficacy of non-pharmacologic interventions for anticipatory CINV among patients with cancer.
Methods
We conducted a systematic search in databases, including PubMed, the Cochrane Library, CINAHL, and Ichushi-Web, from January 1, 1990, to December 31, 2020. Randomized controlled trials, non-randomized designs, observational studies, or case–control studies that utilized non-pharmacological therapies were included. The primary outcomes were anticipatory CINV, with an additional investigation into adverse events and the costs of therapies. The risk-of-bias for each study was assessed using the Cochrane risk-of-bias tool, and meta-analysis was performed using Revman 5.4 software.
Results
Of the 107 studies identified, six met the inclusion criteria. Three types of non-pharmacological treatments were identified: systematic desensitization (n=2), hypnotherapy (n=2), and yoga therapy (n=2). Among them, systematic desensitization significantly improved anticipatory CINV as compared to that in the control group (nausea: risk ratio [RR]=0.60, 95% confidence interval [CI]=0.49–0.72, p<0.00001; vomiting: RR=0.54, 95% CI=0.32–0.91, p=0.02). However, heterogeneity in outcome measures precluded meta-analysis for hypnotherapy and yoga. Additionally, most selected studies had a high or unclear risk of bias, and adverse events were not consistently reported.
Conclusions
Our findings suggest that systematic desensitization may effectively reduce anticipatory CINV. However, further research is warranted before implementation in clinical settings.

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Moral Distress in the Neonatal Intensive Care Unit Experienced by Nurses Caring for Critically Ill Neonates: A Phenomenological Study

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Aims: To elucidate the meaning of moral distress in nurses caring for critically ill neonates.
Design: Qualitative study using Husserl's descriptive phenomenology.
Methods: Between April and December 2022, unstructured interviews were conducted with 11 nurses with at least 3 years of neonatal intensive care unit experience in Japan. They were asked to recall experiences of moral distress and to speak freely about their thoughts and feelings at the time. The analysis followed Colaizzi's seven-step method.

Results: Three themes (‘organisational constraints’, ‘regret’ and ‘unshared experiences’) and seven subtheme clusters were extracted from the nurses' narratives of moral distress, which was the basis of trauma. Subtheme clusters included ‘wavering beliefs’, ‘guilt associated with the death of a child’, ‘powerlessness at being unable to help one's family’ and ‘mismatch with the perceptions and feelings of the family’.
Conclusion: The neonatal nurses were experiencing various moral distresses, but these were not discussed in public, but were dealt with as personal issues, which led to feelings of powerlessness. Therefore, it was thought that the trauma was caused by the experiences of decision-making in treatment policies and advocating for the best interests of the child.
Implications for the Profession: This study clarifies nurses' roles within the neonatal intensive care unit, potentially helping them to handle life-and-death issues and cope with feelings of moral distress.
Impact: This study elucidated the meanings of powerlessness underlying the moral distress experienced by neonatal intensive care unit nurses. These results will contribute to releasing suppressed feelings and thoughts and alleviating unavoidable moral distress in this setting.
Reporting Method: This study was performed in accordance with the COREQ guidelines.
Patient or Public Contribution: Nurses with experience in neonatal intensive care unit nursing participated as interviewees.
They also verified the credibility of survey results and ensured analytical rigour.

掲載誌：Journal of Advanced Nursing, Volume 81, Issue 7, 2025, 4160-4171.

Effects of a Tanzanian prenatal group education program about preeclampsia/eclampsia: A quasi-experimental study

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Background: Preeclampsia/eclampsia has been a common cause of maternal deaths in Tanzania. Early detection of symptom and early access to health care are essential to improve maternal mortality and morbidity caused by pre-eclampsia/eclampsia.
Aim: This study examined the effects of a prenatal group education program in Tanzania which was focused on preeclampsia/eclampsia according to knowledge, behavioral intention, Pregnancy-Related Empowerment Scale, satisfaction, and the incidence of preeclampsia.
Methods: The study was conducted in two district hospitals in Tanzania and used a facility-based pre-post quasi-experimental design with concurrent control. The prenatal group education program was developed to focus on preeclampsia/eclampsia and consisted of lectures, discussions, and review sessions directed at participatory group education. The intervention group participated in a midwife-facilitated prenatal group education program, whereas the control group received routine care. Data were collected through questionnaires before the intervention and 1 month later. A descriptive analysis of the data was performed.
Results: The study analyzed 95 pregnant women within an intervention group (n＝48) and control group (n＝47). At the 1-month post-test, statistically significant differences were observed between the intervention and control groups in the knowledge score (mean＝3.8, SD＝3.6 vs. mean＝−0.8, SD＝3.1, $p<.001$) and satisfaction score (mean＝4.9 vs. mean＝4.6, $p=.032$). Between the two groups, there were no significant differences in the scores of behavioral intention, Pregnancy-Related Empowerment Scale, and the incidence of preeclampsia.
Conclusions: The prenatal group education program increased the knowledge level regarding preeclampsia and gave higher satisfaction among pregnant women. Knowledge was retained for at least 1 month. Continuity in implementation of this program is recommended.

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Comparison and verification of detection accuracy for late deceleration with and without uterine contractions signals using convolutional neural networks

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Introduction: Cardiotocography (CTG) is used to monitor and evaluate fetal health by recording the fetal heart rate (FHR) and uterine contractions (UC) over time. Among these, the detection of late deceleration (LD), the early marker of fetal mild hypoxemia, is important, and the temporal relationship between FHR and UC is an essential factor in deciphering it. However, there is a problem with UC signals generally tending to have poor signal quality due to defects in installation or obesity in pregnant women. Since obstetricians evaluate potential LD signals only from the FHR signal when the UC signal quality is poor, we hypothesized that LD could be detected by capturing the morphological features of the FHR signal using Artificial Intelligence (AI). Therefore, this study compares models using FHR only (FHR-only model) and FHR with UC (FHR + UC model) constructed using a Convolutional Neural Network (CNN) to examine whether LD could be detected using only the FHR signal.
Methods: The data used to construct the CNN model were obtained from the publicly available CTU-UHB database. We used 86 cases with LDs and 440 cases without LDs from the database, confirmed by expert obstetricians.
Results: The results showed high accuracy with an area under the curve (AUC) of 0.896 for the FHR-only model and 0.928 for the FHR + UC model. Furthermore, in a validation using 23 cases in which obstetricians judged that the UC signals were poor and the FHR signal had an LD-like morphology, the FHR-only model achieved an AUC of 0.867.
Conclusion: This indicates that using only the FHR signal as input to the CNN could detect LDs and potential LDs with high accuracy. These results are expected to improve fetal outcomes by promptly alerting obstetric healthcare providers to signs of nonreassuring fetal status, even when the UC signal quality is poor, and encouraging them to monitor closely and prepare for emergency delivery.

掲載誌：Frontiers in Physiology, 2025, Volume 16:1525266.

Impact of Atezolizumab + Bevacizumab Therapy on Health-Related Quality of Life in Patients with Advanced Hepatocellular Carcinoma

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This study aimed to investigate the effects of combination therapy with atezolizumab and bevacizumab (Atezo + Bev) on health-related quality of life (HRQoL) and to identify clinical factors associated with treatment outcomes in patients with advanced hepatocellular carcinoma (HCC). A total of 58 consecutive patients treated between November 2020 and December 2023 were enrolled in the study. We collected baseline characteristics and conducted monthly HRQoL assessments using the EORTC QLQ-C30, analyzing the relationships between these assessments and treatment efficacy, duration, and overall survival (OS).
The median treatment duration was 11.3 months, and the median OS was 20.3 months. The objective response rate (ORR) was 38.6%, while the disease control rate (DCR) was 77.2%. However, HRQoL scores in five functional domains—particularly in physical and cognitive functions—along with various symptom domains, showed significant declines during the first three months of therapy.
Notably, higher baseline scores in cognitive and physical functions were associated with improved ORR and prolonged OS. Additionally, the absence of severe hypoalbuminemia (grade ≥ 2) correlated with better treatment continuity and improved survival outcomes. Multivariate analysis revealed that patients with extrahepatic invasion or those classified as TNM stage IV experienced significantly lower ORRs. In contrast, cognitive function scores of 80 and above, as well as skin toxicities of grade ≥ 2, were associated with better treatment responses. Conversely, grade ≥ 2 hypoalbuminemia was linked to shorter treatment duration and lower OS. Furthermore, maintaining physical function at three months proved to be a favorable prognostic factor.
These findings highlight the importance of proactively managing adverse events and supporting HRQoL through multidisciplinary care, which includes nursing and nutritional interventions. By integrating HRQoL assessments into clinical practice, healthcare providers can better tailor treatments

and support strategies, ultimately enhancing therapeutic effectiveness and patient well-being in individuals with advanced HCC treated with Atezo + Bev.

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Development and psychometric evaluation of the Japanese version of the Nurse Professional Competence Scale Short-Form

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Background: In order to develop high quality human resources with the competence required for nursing, the content of undergraduate education programs must be reviewed and enhanced. Assessments of competence level at the time of graduation can be used to evaluate nursing education programs. International comparisons with a common assessment instrument can help identify and endorse common features, as well as highlight areas that need reform in nursing education programs from a wide range of perspectives.
Aim: To develop the Japanese version of the Nurse Professional Competence Scale Short-Form and assess its psychometric properties.
Design: Instrument validation based on a descriptive cross-sectional study.
Setting: Eight university schools of nursing in mainland Japan.
Participants: A total of 714 graduating nursing students received invitations to and information about this study in mid-February 2022. In total, 299 (41.88%) students responded to all questions and submitted their responses via online survey forms.
Methods: A self-administered questionnaire survey was conducted. Item analysis was carried out followed by confirmatory factor analysis. Concurrent validity and internal consistency were assessed.
Results: Respondent ages ranged from 21 to 51 years, with an average age of 22.4 ±1.97 years. Most of the respondents were female (97.99%). The mean score for the scale was 55.70 (±9.98) and those for the six competence areas ranged from 48.04 (±14.07) to 64.73 (±10.67). Item analysis revealed that all items were within each criterion with the exception of Pearson's correlation coefficients for Items 34 and 35. Confirmatory factor analysis showed the CMIN/df value was 2.46 and root mean square error of approximation value was 0.07. Concurrent validity analysis showed significant moderate correlations (r=0.45 and 0.49, p<0.001). The Cronbach's α values for the scale and six competence areas ranged from 0.75 to 0.95.
Conclusions: The Nurse Professional Competence Scale Short-Form Japanese version that comprises 35 items in six competence areas revealed reasonably acceptable validity and reliability for use in graduating nursing students in Japan. The highest- and lowest-scoring competence areas were Value Based Nursing Care and Medical Technical Care, respectively.

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2025年 252-260

Recovery in Mother-To-Mother Peer Supporters Who Have Experienced Difficulties in Child-Rearing: A Phenomenological Study

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Aims: To elucidate the meaning of recovery for mothers who have experienced difficulties in child-rearing, using insights gained through their activities as mother-to-mother peer supporters.
Design: Phenomenological study.
Methods: From January to October 2022, semi-structured interviews were conducted with 11 mothers active as peer supporters at community child-rearing support centres in Japan. Data were analysed using Colaizzi's phenomenological methodology.
Results: The analysis identified three clustered themes: (1) struggles as a mother, (2) discovery of one's authentic self, and (3) transformation in one's approach to life. The essential needs of mothers during child-rearing were clarified, revealing the vital importance of the mother's mental health compared with merely providing technical support or advice for child-rearing.
Conclusion: During child-rearing, in the context of their

relationships with their children, mothers may feel profound loneliness and question their own self-worth. Life's difficulties are more keenly felt, and the inherent, seemingly insurmountable challenges that they face as mothers are more evident. Therefore, instead of merely focusing on traditional child-rearing methods, it is essential to support mothers in addressing their inherent personality traits, unresolved issues, and internal conflicts.
Impact: This study clarifies that child-rearing support is not merely about providing direct aid to children—in other words, a type of technical assistance—and attests to the importance of child-rearing support that focuses on mothers' own ways of living and being. Transcending national borders, these are vital insights for safeguarding the health of mothers and children and are expected to contribute to the global field of maternal and child health.
Reporting Method: This study was conducted in accordance with the COREQ guidelines.
Patient or Public Contribution: None.

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Intensive care unit interventions to improve quality of dying and death: scoping review

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Background: Intensive care units (ICUs) have mortality rates of 10-29% owing to illness severity. Post-intensive care syndrome affects bereaved relatives, with a prevalence of 26% after three months, increasing the risk for anxiety and depression. Complicated grief highlights issues such as family presence at death, inadequate physician communication, and urgent improvement needs in end-of-life care. However, no study has comprehensively reviewed strategies and components of interventions to improve end-of-life care in ICUs.
Aim: This scoping review aimed to analyse studies on improvement of the quality of dying and death in ICUs and identify interventions and their evaluation measures and effects on patients.
Methods: MEDLINE, CINAHL, PsycINFO, and Central Journal of Medicine databases were searched for relevant studies published until December 2023, and their characteristics and details were extracted and categorised based on the Joanna Briggs model.
Results: A total of 24 articles were analysed and 10 intervention strategies were identified: communication skills, brochure/leaflet/pamphlet, symptom management, intervention by an expert team, surrogate decision-making, family meeting/conference, family participation in bedside rounds, psychosocial assessment and support for family members, bereavement care, and feedback on end-on-life care for healthcare workers. Some studies included alternative assessment by family members and none used patient assessment of the intervention effects.
Conclusion: This review identified 10 intervention strategies to improve the quality of dying and death in ICUs. Many studies aimed to enhance the quality by evaluating the outcomes through proxy assessments. Future studies should directly assess the quality of dying process, including symptom evaluation of the patients.

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The Development and Validation of a Scale to Understand Smoking Cessation Efforts Among Middle-Aged Male Workers

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The purpose of this study was to develop and test the reliability and validity of a scale assessing the efforts made by midlife adult male smokers to quit smoking. The draft of the scale, designated the Smoking Cessation Assessment of Progress Scale (SCAPS), was developed a qualitative inductive analysis of the characteristics of successful smoking cessation efforts among midlife adult male workers in a previous study by the authors. The subjects were men in their 30s and 40s who were employed, had quit smoking for at least six months, and who had succeeded in quitting without seeking outpatient smoking cessation treatment. After a preliminary survey, the main survey was conducted. Data

was analyzed using the maximum likelihood Promax rotation method. Confirmatory factor analysis was subsequently conducted, resulting in the identification of three factors and 17 items. The factors identified were "response to smoking cravings," "perceived benefits associated with successful smoking cessation," and "positive perception of smoking cessation. Cronbach's alpha coefficients for each subscale ranged from 0.702 to 0.873, which were generally favorable. Construct validity was generally ensured by confirmatory factor analysis and the estimates extracted from the results for each factor. The reliability and validity of SCAPS were generally verified.
It is expected that the SCAPS will enable occupational health professionals, when providing smoking cessation support, to accurately assess the current cessation efforts of midlife adult male smokers and provide support accordingly. In the future, further research should be conducted on the effective use of it in various fields of public health, including the field of occupational health.

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Feasibility study to improve oral health in older adult patients using visiting nursing services: A pilot study.

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Among older adults in Japan, those requiring long-term care who use visiting nursing services have particularly poor oral health. Given the importance of oral health, this study aims to evaluate the feasibility of oral health improvement interventions for such older adult patients using visiting nursing services. This study was a single-arm pilot study. The participants were those who provide oral care to older adults who use visiting nursing services, whether the patients themselves or their family members. Participants implemented oral care appropriate to the patient's oral environment at least once a day for four weeks. Feasibility assessment consisted of the recruitment, completion, and compliance rates. Changes in the oral environment were measured using the Oral Health Assessment Tool-Japanese (OHAT-J), and changes in scores were assessed over the study period. The study was conducted across three visiting nursing stations, with 52 participants (a recruitment rate of 73.2%). Of these, 42 participants completed the final questionnaire (a completion rate of 80.8%). The compliance rate was 64.3%. The mean OHAT-J score was 4.5 (*SD* 2.3) pre-intervention, 3.7 (*SD* 2.0) at one week post-intervention, and 3.6 (*SD* 2.2) at four weeks post-intervention ($p < 0.001$), indicating a significant positive trend. The feasibility of this intervention was generally satisfactory, and the results showed that the oral environment was improved. Future studies with a larger scale and higher level of evidence should be conducted to evaluate the effectiveness of the intervention.

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Adjusting to Living with Chronic Liver Disease Among Patients Who Continue Regular Healthcare Visits for Hepatocellular Carcinoma Surveillance: A Grounded Theory Study

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Background: Chronic liver disease (CLD) gradually progresses, often leading to hepatocellular carcinoma (HCC). Patients with CLD were recommended to continue HCC surveillance for early tumor detection and appropriate management. In previous studies, patients with CLD had several psychosocial problems. However, the physical, psychological, and social effects of patients' experiences resulting from continued HCC surveillance remain unclear.
Aim: To explore patients' process of living with CLD while continuing regular healthcare visits for HCC surveillance.
Methods: Semi-structured interviews and participant observations were conducted in this qualitative constructivist grounded theory study. The participants included 11 patients undergoing regular HCC surveillance every 1–6 months for 2–30 years. Data were analyzed using coding, memo-writing, theoretical sampling, and constant comparison.
Results: The participants incorporated regular healthcare visits into their living cycle. The cycle's core comprised two categories ("inferring my liver condition" and "desiring status quo"). The cycle underwent a transition described by three phases ("seeking ways to live with my CLD," "being overwhelmed by living with my CLD," and "reconstructing my life to live with my CLD"). This transition involved adjusting to living with CLD while continuing regular healthcare visits. The relative importance of the cycle's core progressively shifted from "inferring my liver condition" to "desiring status quo."
Conclusions: This study revealed the transition phases of patients' living cycles in adjusting to living with CLD while continuing regular healthcare visits. Understanding the

different phases in which patients are and the psychological impact of healthcare visits can help them look forward to recuperative actions. Furthermore, patients who have a sense of ownership experience loneliness because of regular healthcare visits. A support system including nurses as part of regular HCC surveillance should be established to help ease patients' sense of loneliness by utilizing their sense of ownership.

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Comparative evaluation of the sleep quality metrics between a cardboard bed and a camp cot: a randomized controlled crossover study

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Background: Since the Great East Japan Earthquake, cardboard beds have been widely distributed in evacuation shelters. Because their pressure-redistribution capacity is limited, concerns remain about their ability to prevent lower-back pain and sleep disturbances. The impending Nankai Trough earthquake could displace more than 12 million residents, underscoring the need for ergonomic emergency bedding. Therefore, we compared the effects of cardboard beds and folding camp cots on subjective and objective indices of sleep quality.
Methods: A randomized controlled crossover study involving 20 healthy participants aged 18-45 years was conducted between June 2022 and January 2023. Participants slept one night on each bed type with a minimum three-day washout period. Body pressure distribution and sleep metrics from polysomnography (PSG) and questionnaires were compared ($P < 0.05$).
Results: Camp cots exhibited better body pressure distribution than cardboard beds, leading to improved sleep satisfaction, bedding comfort, and reduced morning sleepiness. However, polysomnography revealed no significant differences in sleep metrics or sleep architecture between bed types.
Conclusions: Cardboard beds demonstrated lower pressure distribution capabilities than camp cots, resulting in reduced subjective sleep quality. Nevertheless, no significant differences were observed in objective sleep metrics from PSG. The single-night experience in healthy individuals may have been insufficient for sleep issues caused by lower back pain to manifest.

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Work-Family Care Obstacles and Life Satisfaction among Japanese Working Family Caregivers Living with an Older Care Recipient.

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Introduction: The growing obstacles to balancing work and family caregiving responsibilities (work-family care obstacles) have led to heightened difficulties in work-life adjustment among employees, potentially resulting in decreased life satisfaction.
Objectives: The aims of this study were to investigate whether facing work-family care obstacles is associated with poor life satisfaction and whether it moderates the association between caregiver burden and life satisfaction among working family caregivers in Japan.
Methods: A cross-sectional descriptive study was conducted involving 141 family caregivers, all of whom were under 65 years old and living with older long-term care recipients. Multiple logistic regression analysis was conducted to examine the primary and moderating effects of work-family care obstacles on life satisfaction in the context of caregiver burden.
Results: Experiencing significant work-family care obstacles was associated with poor life satisfaction among employed family caregivers. Moreover, work-family care obstacles exacerbated the relationship between caregiver burden and poor life satisfaction. Family caregivers who faced work-family care obstacles and experienced two or more caregiver burdens exhibited poor life satisfaction (odds ratio = 5.51, 95% confidence interval = [1.97, 15.43]) compared to those who had one or fewer caregiver burden. For family caregivers without work-family care obstacle, the risk of poor life satisfaction did not vary depending on the number of caregiver burdens.
Conclusion: These findings suggest that work-life adaptation is more important than work-life balance for maintaining feelings of satisfaction in both life and work.

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Development and Examination of an Educational Program Combining E-Learning and Face-to-Face Training That Nurtures Inflammatory Bowel Disease Nurse Specialists

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This study developed and evaluated an educational program aimed at nurturing inflammatory bowel disease (IBD) nurse specialists in Japan, where the demand for advanced IBD nursing care has increased due to the disease's rising prevalence. The program was grounded in instructional design (ID) theory and utilized the ARCS model of motivation—attention, relevance, confidence, and satisfaction—to enhance learning effectiveness. It combined e-learning (2), which followed an earlier foundational e-learning (1), with in-person training sessions focusing on disease activity assessment and self-care support, which are essential competencies in IBD nursing.
A pre-post intervention design without a control group was used to assess the program's impact. Nurses from IBD-related medical facilities across Japan participated. Self-evaluations of understanding and practical application were collected across ten domains (five for disease activity and five for self-care support) at three points: before and after e-learning (2), and after face-to-face training. Additional evaluations included the Japanese version of the Course Interest Survey (CIS) and a comprehensive satisfaction survey.
Among 75 initial applicants, 30 completed the full program. Statistically significant improvements were observed in understanding topics such as inflammation and treatment. However, increases in practical application were more modest, and participants reported lower confidence levels despite improved theoretical knowledge. Satisfaction with both e-learning and face-to-face components was high, particularly regarding training relevance and content clarity.
These findings support the effectiveness of a blended learning model for training IBD nurse specialists, particularly in enhancing theoretical competence. However, further improvements are needed to bridge the gap between knowledge and practical confidence. This study contributes foundational evidence for advancing IBD nursing education and suggests future directions for developing sustainable specialist training programs tailored to the Japanese healthcare context.

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Relationship between severe radiodermatitis and skin barrier functions in patients with head and neck cancer: A prospective observational study

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Objective: Severe radiodermatitis with erosion is a painful condition that affects quality of life; therefore, developing methods for its prevention is an urgent issue. Therefore, this study aimed to determine the morphological characteristics of the development and healing processes of severe radiodermatitis in patients with head and neck cancer and to explore the association between skin barrier function and development of severe radiodermatitis.
Methods: In this prospective observational study, the cervical regions of patients with head and neck cancer who underwent radiotherapy at a university hospital from October 2022 to March 2023 were photographed, and morphological characteristics of the development and healing process of severe radiodermatitis were extracted using the qualitative sketch method. Skin barrier function, including skin microbiota and dermal echogenicity, was investigated before initiating radiotherapy, and its relationship with radiodermatitis was examined using the Mann–Whitney U test or Fisher's exact probability test.
Results: Nine patients were followed for a median of 61 (range 55–87) days with a total of 88 observations. The morphological characteristics of severe radiodermatitis were "localized erosion–epithelialization" and "widespread erosion–crusting," and compared to non-severe radiodermatitis, with low levels of Staphylococcus aureus (p=0.024), Staphylococcus hominis (p=0.024), and reduced dermal echogenicity (p=0.036). Furthermore, the "widespread erosion–crusting" was associated with a subepidermal low echogenic band.
Conclusions: To prevent severe radiodermatitis, in addition to moisturizing the irradiated area and protecting it from mechanical irritation, improving skin barrier function before radiotherapy initiation may be effective.

掲載誌：Asia-Pacific Journal of Oncology Nursing, 2024

2025 年度国際学会発表助成　論文要旨

Promoting Smoking Cessation Education for Patients with Cardiovascular Diseases: A Systematic Review and Meta-Analysis

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Backgrounds: Smoking contributes to approximately 10% of cardiovascular diseases (CVDs) globally, making it a significant modifiable behavioral risk factor of CVDs. The primary objective of this systematic review is to evaluate the effectiveness of smoking cessation education, excluding comprehensive cardiac rehabilitation programs, provided by healthcare professionals to patients with CVDs.
Methods: We searched electronic databases and other resources, including PubMed, CENTRAL, EMBASE, CINAHL, MEDLINE, and PsycINFO, from the inception to 10 April 2021, without restrictions on language and publication types. We included randomized controlled trials (RCTs) and cluster RCTs assessing smoking cessation education in patients with CVDs. The education was provided by healthcare professionals such as medical doctors, nurses, clinical counselors, and psychologists, offering advice, counseling, and/or strategies to help patients to quit smoking. A random-effects meta-analysis was performed, with the pooled effect size estimated using risk ratio (RR) with 95% confidence interval (CI). Independent reviewers performed study selection, data extraction, risk of bias assessment, and certainty of evidence using the GRADE approach.
Result: A total of 5752 articles were retrieved from the databases. Of these, 97 articles were identified for full-text screening and assessed the predefined eligibility criteria in detail. Nineteen trials randomizing 5028 patients with CVDs in the intervention group (51.2%) and in the control group (48.8%) met the inclusion criteria. The pooled estimates showed a significant positive effect of the education interventions on smoking cessation among patients with CVDs compared to usual care (RR, 1.27; 95% CI, 1.18–1.38; I^2 = 42%, moderate-certainty of evidence.)
Conclusion: Smoking cessation education interventions are effective in quitting smoking among patients with CVDs.
Keywords: Cardiovascular Disease, Meta-Analysis, Non-communicable diseases, Smoking Cessation, Systematic Review, Patient Education

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Emotions Experienced by Spouses of Individuals with Young-Onset Alzheimer's Disease: Following Biomarker-Based Diagnosis

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Background
Young-onset Alzheimer's disease (YOAD), diagnosed before age 65, significantly affects not only the individuals themselves but also their spouses, who often assume the role of primary caregiver. While the burden of caregiving in young-onset dementia has been studied, less is known about the emotional trajectories of spouses following a definitive YOAD diagnosis based on biomarker testing.

Objective
This study aimed to explore the emotions experienced by spouses of individuals who received a definitive diagnosis of

YOAD through amyloid PET imaging.

Methods
A qualitative descriptive study was conducted. Nine spouses of YOAD patients were recruited from a university hospital and a general hospital in Japan. Each participant participated in two semi-structured interviews conducted 3–6 months apart. Data were analyzed inductively using content analysis and NVivo 13 software and reported in accordance with COREQ guidelines.

Results
Four main categories, 13 generic categories, and 45 subcategories were identified:
(1) Seeking understanding and accessible support while treasuring existing connections,
(2) Navigating grief, frustration, and overwhelm in the caregiving journey,
(3) Feeling unable to plan for the future due to anxiety about life changes resulting from progressing symptoms, and
(4) Wishing to live peacefully as a couple while accepting dementia.
Participants described emotional shock, sadness, guilt, and inner conflict as they adjusted to their caregiving roles. Although they actively sought support and information, they encountered structural and emotional barriers. Despite distress, they expressed a desire to preserve their marital relationships and adapt to ongoing changes brought by dementia.

Conclusions
Spouses of individuals with young-onset Alzheimer's disease navigate profound emotional complexity while fighting to preserve their partnerships and identities. Their experiences reveal remarkable resilience alongside devastating loss—managing grief for the person their partner once was while caring for who they are becoming. These caregivers require more than generic support; they need early, sustained interventions that recognize their dual roles as both grieving spouse and devoted caregiver. Effective support must integrate psychological counseling, practical assistance, and long-term care coordination tailored to their unique circumstances. By understanding how these spouses adapt to uncertainty while maintaining deep connection, we can develop interventions that honor both their extraordinary commitment and their profound need for support in sustaining meaningful relationships amid progressive loss.

Circadian rhythm entrainment factors and premenstrual syndrome: a cross-sectional study focusing on chronotypes

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Objective

Premenstrual syndrome (PMS) is a common condition among women, characterized by physical and emotional symptoms. Although pharmacological treatments are available, their side effects limit their suitability for all women. Circadian rhythms disruption might affect mental and physical health.

The purpose of this study was to determine how lifestyle factors (light exposure, exercise, and food intake) related to circadian rhythm entrainment contribute to PMS severity based on chronotype.

Methods

This cross-sectional study was analyzed 564 Japanese women aged 20-49, excluding 221 neither types, consisting of 249 morning types and 315 evening types.

PMS severity was measured using the Menstrual Distress Questionnaire (Moos 2010) and its association with lifestyle factors related to circadian rhythm entrainment were assessed by multiple regression analysis. This study was conducted with the Ethics Committees.

Results

The percentage of women reporting mild or worse PMS score were 93.3% for pain, 90.4% for water retention, 47.0% for autonomic reactions, and 85.5% for negative affect, many women suffer from PMS. For morning types, 4 or more hours of screen time after sunset was associated significantly with higher negative affect scores. Conversely, for evening types, less than 2 hours of daytime light exposure was associated with increased negative affect and water retention, and engagement in exercise was associated with reduced water retention. Meal timing was not associated with PMS severity.

Conclusions

Circadian rhythm entrainment through appropriate light exposure and exercise could alleviate PMS. The consideration of individuals' chronotypes may enhance the effectiveness of lifestyle-based interventions for PMS relief.

17th ICPA2025 (International Congress of Physiological Anthropology)
University of Twente, Enschede, the Netherlands, September 10 - 12, 2025

Nursing Support for Life after the Discharge of Liver Transplant Recipients in Japan

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Objective: In Japan, liver transplant recipients, mainly living donor transplant recipients, are increasing in number annually, highlighting the importance of considering their lives after transplantation. Nurses need to help recipients maintain good health after hospital discharge. This study aimed to identify the nursing support provided to posttransplant recipients during their hospital stay, taking into account their life after discharge.
Methods: Ten nurses (from two institutions) who had assisted in liver transplantation for at least 5 years were semi-constructively interviewed and analyzed using the qualitative synthesis method (KJ method).
Results: The reality of nursing support is characterized into six: “efforts to improve teamwork,” “efforts to provide emotional support to patients, families, and key persons,” “step-by-step efforts for patients from preoperative to post-discharge life,” “efforts to manage patients’ physical condition,” “continuous efforts to complement each other during the transition phase,” and “efforts to prepare for medical support after discharge.”
Conclusions: Japanese ward nurses have few opportunities to interact with recipients and their families after discharge; consequently, they can hardly imagine what life will be like after discharge. However, they work in cooperation with other medical professionals, have a long-term perspective from postoperative life to life after discharge, and provide step-by-step support tailored to each patient’s needs during the transition phase.

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発表場所（国名）：University of Vienna（Austria）
発表日：August 8, 2025

Impact of Advance Care Planning on the Mental Health of Bereaved Families: A systematic review

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Background: Decisions regarding end-of-life care, including organ donation, are often made by surrogate decision-makers, such as family members. These decisions can place a significant mental burden on surrogates, especially when the patient’s wishes are unclear. Advance care planning (ACP) is a patient-centered process of advanced discussion. This intervention is expected to improve the mental health of surrogates. This study reviewed the evaluations of ACP interventions and examined decision-support approaches, including those related to organ donation.

Methods: This review followed the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines. The protocol is registered with PROSPERO (CRD42022381929). Studies published up to 2024 were identified through comprehensive searches in MEDLINE, EMBASE, PsycINFO, and the Cochrane Central Register of Controlled Trials. Literature selection was conducted independently by two researchers using Covidence Systematic Review software. The inclusion criteria were studies evaluating ACP interventions that met the following conditions: (i) studies reporting survivors' mental health outcomes, and (ii) randomized controlled trials (RCTs) or non-RCTs.

Results: A total of 2,906 search results were obtained, and 13 studies met the inclusion criteria, comprising 11 RCTs and two non-RCTs. All interventions involved trained medical professionals facilitating ACP discussions before the patient’s death. A scale assessing depression, anxiety, and Post-Traumatic Stress Disorder (PTSD) was used to evaluate mental health. Five studies reported that ACP improved the mental health of family members. Notably, Song et al. (2015, 2016, and 2024) conducted three of these studies.

Conclusions: Depending on the subject and intervention method, pre-death discussions are expected to improve the mental health of bereaved families. ACP may also be a tool for supporting decisions related to organ donation, which is often a mentally stressful process. Implementing ACP could contribute to addressing the shortage of organ donations, a pressing issue in Japan.

発表学会名：16th European Society for Organ Transplantation (ESOT 2025)
発表場所（国名）：London (UK)
発表日：29st June 2025

Effects of an intensive home visitation program addressing unmet needs in adolescent mothers: a pragmatic controlled trial

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2）St. Luke's International University, Graduate School of Nursing Science, Women's Health and Midwifery

Background
Adolescent pregnancy and motherhood are highly stigmatized, leading to gap in support for adolescent and young adult (AYA) mothers. As a result, conventional care models overlook their psychosocial needs, failing to form trusting relationships to reduce the risk of postpartum depression. Early Partnership (EP) is an intensive, multi-professional home-visiting programme developed through a co-production process to overcome these limitations and provide non-judgemental, tailored support. This study aims to evaluate the benefits of EP in improving the perceived fulfilment of psychosocial needs, maternal well-being, and reducing postpartum depression among first-time AYA mothers up to one year postpartum.
Methods
We conducted a pragmatic, historically controlled trial involving first-time expectant AYA mothers (aged under 26 years) across four municipalities in Tokyo. Participants were enrolled before 35 weeks of gestation. Those in the intervention group (EP) were enrolled between August 2022 and June 2023, while those in the control group, who received usual care, were enrolled between November 2021 and July 2022. Trained Family Support Workers delivered intensive home visits, with ongoing training and supervision to ensure needs-based, non-judgemental support. Data were collected at five time points: baseline (<35 weeks' gestation), four weeks post-baseline, and at one, six, and 12 months postpartum. Outcomes were analysed using multilevel models.
Findings
Among 151 participants enrolled in the intervention group and 158 in the control group, those in the EP group showed significantly greater improvements in perceived fulfilment of psychosocial needs and mental well-being. Postnatal depressive symptoms were significantly reduced at both six and 12 months postpartum compared with the control group (effect sizes for depression: d = 0.49, 0.48).
Interpretation
The EP programme is a feasible and effective intervention that enhances psychosocial outcomes and reduces postpartum depression in first-time AYA mothers. These findings support the integration of co-produced, needs-based home-visiting services into maternal care frameworks to better support vulnerable young mothers.

発表学会名：International Society for the Prevention of Child Abuse and Neglect（ISPCAN）congress
発表場所（国名）：Lithuania
発表日：October 6-9, 2025 (Mon-Thu)

Effectiveness of Interprofessional Education for Pharmacy and Nursing Students

Sachiko Mitsuki[1] ／ Nobuhito Shibata[2] ／ Asako Nishimura[2] ／ Kyoko Ogawa[1] ／ Yukari Katayama[1] ／ Kazumasa Naruhashi[2]

1）Doshisha Women's College of Liberal Arts, Faculty of Nursing and Graduate School of Nursing
2）Faculty of Pharmaceutical Sciences

Objective: This study aimed to measure the effectiveness of inter-professional education (IPE) in developing necessary skills (knowledge, skills, and attitudes) for administering team-based medicine among graduating students by assessing their abilities before and after an intervention.
Methods: This study included 56 sixth-year pharmacy students and 20 fourth-year nursing students. Who had completed clinical practice training. The IPE program had three key objectives: (1) to facilitate case-based discussions incorporating both pharmacological and nursing perspectives, (2) to deepen mutual understanding of each profession's expertise through collaboration, and (3) to enhance communication skills essential for teamwork. Program effectiveness was assessed using two validated self-assessment tools: KiSS-18 for general social skills and RIPLS for teamwork attitudes. A two-way ANOVA was conducted, with faculty affiliation (pharmacy or nursing) and time (pre/post intervention) as independent variables, and KiSS-18 and RIPLS scores as dependent measures.
Results and Discussion: The KiSS-18 scores of both pharmacy and nursing students showed no significant improvement after the program, indicating no impact on their general social skills. However, the scores of the RIPLS subscale, "Teamwork and Collaboration" improved significantly in both groups after the intervention ($F(1,74) = 35.4$, $p < .01$), suggesting that the IPE met its goals of fostering teamwork and communication skills. No significant change was observed in understanding each other's expertise, likely because the students had already developed this knowledge through their prior clinical experience. The "IPE Opportunity" subscale scores, which measured students' appreciation for joint learning, also showed significant improvement ($F(1,74) = 13.5$, $p < .01$) post-intervention, though nursing students tended to have higher initial scores. No significant interaction

was found between the independent variables for either the RIPLS or KiSS-18 scores.
Conclusion: First, the IPE program improved students' teamwork and communication skills, which are essential for patient-centered care in complex settings. Second, pharmacy and nursing students recognized the importance of interprofessional collaboration and valued shared learning in clinical contexts. Third, the program had limited impact on understanding each other's roles, highlighting the need for earlier IPE to foster deeper interdisciplinary awareness.

Name of the conference, site, and date of presentation
ICN2025 (International Council of Nurses Congress2025), Helsinki, Finland 9-13 June, 2025

The real situation of affairs of supporting the foreign parents and children at the health checkups for infants through ethnography - First Report

Masumi Moriyama[1)] ／ Yayoi Shoji[2)] ／ Eri Mochida[3)]

1）Japanese Red Cross Kyushu International College of Nursing, Fukuoka, Japan
2）Graduate School of Health Care and Nursing, Juntendo University, Chiba, Japan
3）Oita University of Nursing and Health Sciences, Oita, Japan

Purpose:
This study aimed to clarify the current situation of support for foreign parents and their children during group infant health checkups (IHCs) at public health centers and to explore improved approaches to better meet their needs.

Method:
From August 27 to 30, 2024, we visited group IHCs for 4-, 7-, 18-month, and 3-year-old children in Town A, which has a large foreign resident population. Data were collected using ethnographic methods, followed by qualitative inductive analysis.

Results:
A total of 84 parent-child pairs participated in the IHCs, 22.19% of whom were foreign families.
Data were obtained through 860 minutes of participant observation, 341 minutes of interviews with 18 foreign parent-child pairs, and 85.44 minutes of interviews with five nursing professionals (four public health nurses and one midwife).

Three key characteristics of the IHCs were identified:

1. Supporting children's growth and development, maintaining their health, and assisting parents in child-rearing
2. Public health nurses (PHNs) serving as key players in multidisciplinary collaboration
3. Responding to the needs of foreign families with varying Japanese language proficiency

Foreign families came from countries such as Brazil, Peru, Bolivia, Italy, and Nepal, with significant individual differences in Japanese proficiency. PHNs employed strategies including simplified Japanese, gestures, and interpreters (official Portuguese interpreters or family members). However, communication was often limited to Japanese, and confirming understanding remained difficult. Foreign parents often responded positively to advice; however, there were reports that some answered "I'm fine" too readily due to language barriers, and had difficulty completing forms or understanding the materials.

Discussion:
Although public health professionals made efforts to communicate effectively, they still faced challenges in interacting with linguistically diverse populations. The findings highlight the need for multilingual materials, expanded interpreter services, and multimodal communication training for PHNs to ensure equitable understanding and support for all families.

発表学会名：International Council of Nurses (ICN) Congress 2025
発表場所：Messukeskus Expo & Convention Center, Helsinki, Finland
発表日：9-13 June 2025

When Do Older Hemodialysis Patients Start Thinking About Advance Care Planning?

Akiko Yamanaka ／ Atsuko Tokushige

Mukogawa Women's University School of Nursing, Graduate School of Nursing, Japan

Introduction: Many patients in Japan little experience discussed Advance Care Planning (ACP) with their health care providers or family members, and it is often difficult to determine when to begin talking to patients about ACP. The purpose of this study was to determine what made older hemodialysis patients consider ACP by interviewing hemodialysis patients with experience in ACP.

Methods: This was a qualitative descriptive study based on semi-structured interviews of 15 patients aged 65 years or older living in Hyogo, Japan, and had effectuated ACP. This study was conducted with the approval of the Research Ethics Committee of Mukogawa Women's University (Approval No. 23-11).
Results: We identified 13 items as triggers for the patients

to begin to consider ACP. The triggers were: 1) from the perspective of physical condition: [when they became aware of a change in their physical condition] ; 2) from the perspective of one's life situation: [when their life changed due to decline in physical function], [when their life changed due to economic hardship], [after retirement], and [in case of disaster]; 3) from the perspective of one's own thoughts: [I don't want to burden my family], [I realize the need to think about the future], [I started to think about my own end after the death of a fellow dialysis patient], [I experienced the death of someone close to me], and [I visualize an image of what I don't want to become]; and 4) from the perspective of timing: [when I was initiated on dialysis], [when I became aware that I was getting older], and [when my health care provider talked to me about ACP].

Conclusion: The triggers for patients to begin to think about ACP were often related to their life situation and thoughts. To determine when to begin ACP based on the patient's condition, it is important to understand their needs and thoughts. To accomplish this, it is important to communicate not only about changes in physical condition, but also about changes in life and thinking.

発表学会名、発表場所（国名）、発表日
The 39th International Society of Blood Purification (ISBP) Congress
University of Hawaii John A Burns School of Medicine, Honolulu, Hawaii, USA
August 20, 2025

Development of a Recovery Scale for Families of People with Gambling Problems (Report 1: Examination of the Content Validity of a Draft Scale)

Hiroko Yoshii

Kansai University of International Studies, School of Health Sciences, Department of Nursing

[Objective]

Co-dependent relationships, such as when family members repay gambling debts on behalf of the individual, enable the resumption of debt accumulation, which consequently worsens the condition. Unlike conventional approaches that focus on family support to improve codependency, this study posits that addressing underlying low self-esteem through psychiatric nursing is necessary. Recovery requires support aimed at building new self-esteem.

This study verified the content validity of a draft scale to develop a measurement tool for assessing recovery in families affected by gambling problems.

[Methods]

First, a conceptual model was constructed using four literature sources. Next, a draft item pool was created based on items related to the recovery of family members in self-help groups, derived from two sources within the conceptual model. Three university nursing professors and the author then reviewed the validity, comprehensiveness, and clarity of the questionnaire items based on the conceptual model. Finally, seven experts and seven self-help group family members adopted items that met the 80% threshold on the Item Content Validity Index (I-CVI) to verify content and face validity.

[Results]

Consensus was reached on 31 of the 39 items among all participants. Opinions diverged on eight items. Four experts argued that "family recovery interacts with the gambler's recovery," while other experts and family members countered that "family recovery should aim for economic and psychological independence and should not be included in the interaction with the gambler's recovery." After final deliberation, the draft scale was finalized.

[Discussion]

According to the COSMIN bias risk checklist, expert and user involvement is essential for scale development. During the creation of this draft, the opinions of experts and 14 family members of gamblers were reflected in all items. Furthermore, four nursing researchers were consulted regarding the validity, comprehensiveness, and clarity of this conceptual model to confirm the appropriateness and representativeness of the items.

発表学会：The 10th International Conference on Behavioral Addictions (ICBA)
発表場所：La Cité des Congrès de Nantes (France)
発表日：July 7-9, 2025.

2025 年度若手研究者研究助成　採択者

（氏名五十音順）

市販薬乱用を行う若年層の支援に関する探索的研究 ―コーピング特性とピアサポートの役割に着目して―

淑徳大学　岩澤　敦史

病院での就業経験のある新任訪問看護師の自己教育性に関連する個人特性および職場特性に関する混合型研究

東京医療保健大学　大河原　知嘉子

中小規模事業場における化学物質の自律的管理の実態および事業者の安全行動意思との関連の検討

順天堂大学　岡部　花枝

中堅看護師の職業キャリア成熟とキャリア・アダプタビリティを促進する教育プログラムの開発

日本医療大学　田川　史穂里

成人うつ病患者の退院後における否定的思考への対処 ―再発の有無による質的比較―

藤田医科大学　富田　元

チャイルド・マルトリートメントによって精神疾患と愛着の問題を併せ持つ患者に対する愛着修復看護モデル（RAN モデル）の原案構築

人間環境大学　永井　翔

高齢者の加齢性血管状態変化を考慮した末梢静脈路確保における最適な駆血圧の検証 ～健常若年成人での先行検証を基盤にした臨床実践へ向けた応用的実験研究～

大阪成蹊大学　中島　一成

妊娠・出産・育児中の関節リウマチ女性とその家族に対する専門職の支援に関する実態調査

東京情報大学　中山　瑠理

月経前症候群（PMS）/ 月経前不快気分障害（PMDD）を緩和する看護ケア技術の検討

令和健康科学大学　福田　沙樹

点滴与薬における 6R 遂行 VR アプリを用いた新人看護師教育の教育効果検証：パイロットスタディ

東京女子医科大学　福永　寛恵

看護師のバーンアウトと患者への身体拘束の関連

帝京大学　星野　晴彦

臨地実習における看護学生の心理的安全性を向上させる要因についての調査研究

弘前学院大学　村上　優人

地域で暮らすがん患者の災害自助力の向上を目指した基礎調査

埼玉医科大学　村田　美穂

COMMUNICATION SKILLS IN HEALTHCARE PROFESSIONALS（CSS-HP ©）日本語版の妥当性の検証

昭和医科大学　山路　野百合

Patient Safety Incident に関与した医療従事者の心理的適応と専門職アイデンティティの変容 ―支援モデル構築に向けたグラウンデッド・セオリー研究

関西医科大学　吉田　麻美

助成事業について

2025 年度　新規に国際交流活動を行うための助成

国際交流活動を活性化させ、国際的に活躍できる看護人材の育成に向けた看護学教育の在り方について議論を深めることを目的とした助成事業

19 件の応募があり、審査の結果、以下 4 校の申請を採択しました。

- **昭和医科大学　保健医療学部看護学科**
  交流先：フリンダース大学看護学部（オーストラリア）
- **創価大学　看護学部**
  交流先：バルセロナ大学看護学部（スペイン）
- **長岡崇徳大学　看護学部看護学科**
  交流先：テキサス・クリスチャン大学（アメリカ）、
  スウェーデン・クオリティケア株式会社（スウェーデン）
- **人間環境大学　松山看護学部看護学科**
  交流先：モンゴル医科大学看護学部（モンゴル）

2025 年度　地区活動プロジェクト

会員校の地区における協働を進め、看護学教育の発展に寄与する新たな活動の在り方を探索することを目的とし、各地区の会員校の協働活動に助成を行う事業

3 件の応募があり、審査の結果、以下 3 件の申請を採択しました。

- **共に考える医療倫理 ～B 型肝炎控訴原告団と弁護団の声を聞く～**
  地区：北海道・東北
  協働する会員校：東北文化学園大学、岩手保健医療大学
- **「看護の魅力発信！ 中学生対象 訪問型看護体験」**
  地区：中部
  協働する会員校：豊橋創造大学、人間環境大学（看護学部）
- **保健医療福祉系大学のメンタルヘルス不調休学者に対する復学支援プログラムの開発に向けた活動**
  地区：九州・沖縄
  協働する会員校：九州看護福祉大学、帝京大学（福岡医療技術学部）

日本私立看護系大学協会　役員一覧

役名	氏名	所属機関	担当委員会
会　　長	原　　玲　子	日本赤十字東北看護大学	渉外委員会、将来構想検討委員会、50 周年記念事業準備委員会
副 会 長	荒　木　暁　子	東邦大学（看護学部）	渉外委員会、将来構想検討委員会、50 周年記念事業準備委員会
	洪　　愛　子	神戸女子大学	渉外委員会、将来構想検討委員会、50 周年記念事業準備委員会
業務執行理事	鎌　田　佳奈美	摂南大学	広報委員会、渉外委員会、将来構想検討委員会、50 周年記念事業準備委員会
	櫻　井　しのぶ	順天堂大学（医療看護学部）	国際交流委員会、渉外委員会、将来構想検討委員会、50 周年記念事業準備委員会
理　　事	池　田　恵美子	四国大学	地区活動委員会
	池　松　裕　子	日本赤十字九州国際看護大学	国際交流委員会
	江　川　隆　子	関西看護医療大学	大学教育委員会
	太　田　勝　正	東都大学（沼津ヒューマンケア学部）	大学教育委員会
	岡　田　みどり	川崎医療短期大学	大学運営・経営委員会
	亀　井　智　子	聖路加国際大学	研究活動委員会
	川　本　利恵子	湘南医療大学	大学運営・経営委員会
	小　原　　泉	自治医科大学	大学教育委員会
	小　松　万喜子	中部大学	研究活動委員会
	篠　崎　恵美子	人間環境大学（看護学部）	地区活動委員会
	竹　田　恵　子	川崎医療福祉大学	大学運営・経営委員会
	永　田　智　子	慶應義塾大学	大学運営・経営委員会
	前　川　幸　子	甲南女子大学	研究活動委員会
	宮　城　由美子	福岡大学	広報委員会
	安　酸　史　子	日本赤十字北海道看護大学	大学教育委員会
監　　事	北　　素　子	東京慈恵会医科大学	—
	守　田　美奈子	日本赤十字看護大学（看護学部）	—
名誉会長	近　藤　潤　子	天使大学	—

社員総会／理事会報告

2025年度　一般社団法人日本私立看護系大学協会定時社員総会

開催日時　2025年7月28日（月曜日）
　　午前10時00分から午前10時30分
開催場所　東京都千代田区神田須田町1-5　翔和須田町ビル2階
　　法人事務所
総社員数　633名
総社員の議決権数　633個
出席社員数　500名（議決権行使書による）
出席社員の議決権数　500個

原玲子会長より、定款第18条により、現時点、正会員633名中、議決権行使書提出者500名をもって総会が成立することが報告された。定款第17条により、社員総会の議長は原玲子会長とし、第22条により、議事録署名人は亀井智子理事、篠崎惠美子理事が指名された。

審議事項

1）第1号議案　2024年度事業活動報告及び決算承認・監査報告に関する件

（1）2024年度理事会報告

原会長より、2024年度年次報告書に基づき、理事会報告を行った。

（2）2024年度各委員会活動報告

洪愛子副会長より、2024年度年次報告書に基づき、「大学教育委員会」、「研究活動委員会」、「国際交流委員会」、「大学運営・経営委員会」、「渉外委員会」、「広報委員会」、「将来構想検討委員会」、「地区活動委員会」、「2024年度特別事業」の活動報告を行った。

（3）収支決算・監査報告

櫻井しのぶ業務執行理事より「2024年度日本私立看護系大学協会決算書」、「正味財産増減計算書」「貸借対照表」「財産目録」に基づき、2024年度決算報告があった。続いて、守田美奈子監事より2024年度の監査報告があった。

第1号議案は500個の賛成を得て承認された。

2）第2号議案　理事選任に関する件

議長より、関東（東京以外）地区選出の井上智子氏（国際医療福祉大学成田看護学部）が本定時社員総会の終結時をもって理事を辞任するため、改めて理事を選任する必要があり、2024年度に実施した役員候補者選出選挙により、関東（東京以外）地区の次点者である川本利恵子氏（湘南医療大学）を後任として推挙することの説明があった。

第2号議案は500個の賛成を得て原案通り川本利恵子氏を選任することが承認された。

報告事項

1）2025年度事業活動計画及び予算に関する件

（1）重点事業について

原会長より、2025年度重点事業について説明があった。本協会は50周年を目前に控えるも、私立看護系大学を取り巻く状況は依然として厳しいといえる。少子化や理系女子増加を背景とした看護系大学の入学者減少の懸念もあり、魅力発信の継続的な検討が必要である。2025年度の重点事業は、教職員研修の充実、地区ごとの情報交換と連携促進、そして組織・活動の将来的なあり方の検討を掲げており、研修や支援事業の成果も評価しながら、私立看護系大学の発展に向けた取り組みを推進していく。

（2）2025年度事業活動計画

洪愛子副会長より、「2025年度一般社団法人日本私立看護系大学協会委員会等活動計画一覧」、「2025年度事業活動計画書」に基づき各委員会の事業活動計画の説明があった。

（3）2025年度予算

櫻井しのぶ業務執行理事より「2025年度一般社団法人日本私立看護系大学協会予算書」に基づき予算について報告があった。

2）規程の整備に関する件

鎌田佳奈美業務執行理事より、役員候補者選出選挙の電子投票の導入に伴う役員候補者選出規程の改正について報告があった。

2025年度　第1回定例理事会

開催日時　2025年6月9日（月曜日）9時00分から10時10分

審議事項

1. 理事交代について

関東（東京以外）地区選出の井上智子理事（国際医療福祉大学成田看護学部）の辞任に伴い、川本利恵子氏（湘南医療大学）を理事候補者として社員総会に推薦することが承認された。

2. 2025年度社員総会について

2025年度定時社員総会の運用方法、2025年度定時社員総会議事次第（案）が承認された。

3. 2024年度事業活動報告について

「大学教育委員会」、「研究活動委員会」、「国際交流委員会」、「大学運営・経営委員会」、「渉外委員会」、「広報委員会」、「将来構想検討委員会」、「地区活動委員会」、「2024年度特別事業」の活動報告を行った。

4. 2024年度決算（案）について

櫻井しのぶ理事より説明があり承認された。

5. 監事監査について

守田美奈子監事より説明があり承認された。

6. 2025年度事業活動計画（案）について

「大学教育委員会」、「研究活動委員会」、「国際交流委員会」、「大学運営・経営委員会」、「渉外委員会」、「広報委員会」、「将来構想検討委員会」、「地区活動委員会」より2025年度事業活動計画案の説明があり承認された。

7. 2025年度予算（案）について

櫻井しのぶ理事より説明があった。

8. 2025年度新規会員校について

植草学園大学看護学部看護学科、別府大学看護学部看護学科の2校の入会が承認された。

報告事項

1. 内部監査について

櫻井しのぶ理事より報告があった。

2. 若手研究者研究助成の研究期間の延長について

小松万喜子理事より、2023年度若手研究者研究助成採択者より研究期間延長の届出があり、委員会において研究期間延長後の見通し等について検討を行い、研究期間の延長を認めることとしたとの説明があった。

3. 2024年度特別事業報告

株式会社進研アドと協力し動画を制作・配信し、特設Webページでは「看護の多様な可能性」を公開したと議長より報告があった。また、TikTok・Instagram・YouTubeで、看護の多様な可能性を

示す動画広告を配信した。更に、高校の探究学習へのアプローチとして、副教材に看護と社会課題に関する記事を掲載し、全国2,525校・18,550冊を配布した。高校生の自由記述アンケートからは、看護とSDGsとの関わりや、病院以外の多様な職域（国際支援、災害支援、AI活用等）への関心の声が多く寄せられた。

2025年度　第2回定例理事会

開催日時　2025年7月28日（月曜日）11時00分から11時50分

審議事項

1. 川本利恵子理事の担当する委員会

本理事会から川本利恵子氏が理事として就任した。議長より担当の委員会は大学運営・経営委員会として推薦があり承認された。

2. 2025年度研究助成事業採択者の決定

亀井智子研究活動委員会委員長より応募者数と採択者数について説明があった。選考の経緯について説明があり、看護学研究奨励賞19名、若手研究者研究助成15名、国際学会発表助成10名を採択することが承認された。

3. 選挙管理委員会について

次回の役員候補者選出選挙から電子投票を導入することに伴い、選挙管理委員会の立ち上げを例年より前倒しする必要が生じた。選挙管理委員会の選任について執行部に一任する提案があり承認された。

報告事項

1. 事業活動報告

(1) 大学教育委員会

安酸史子理事より報告があった。引き続き前田樹海先生に委員として加わっていただくということを決定した。また、新任教員向け研修会「大学教育とは」は申し込みを終了し、2025年8月2日（土）に開催する。

(2) 研究活動委員会

亀井智子理事より報告があった。助成事業の選考会議を開催した。研究セミナーは申し込みを開始し、企画を進めている。

(3) 国際交流委員会

櫻井しのぶ理事より報告があった。引き続き中村敦子氏と若林律子氏に委員としてご協力いただく。また、「在日外国人や来日外国人への看護」をテーマとした研修会は、開催日を2026年1月31日（土）と決定し、講師には順天堂大学国際教養学部の大野直子准教授（医療通訳の研究者）と、インド国籍のマヒンダー・クマール氏（日本赤十字九州国際看護大学准教授）と決定した。

国際交流活動の助成事業について、応募は19件あり、審査の結果、創価大学、昭和医科大学、長岡崇徳大学、人間環境大学松山看護学部の4校を採択した。

(4) 大学運営・経営委員会

永田智子理事より報告があった。川本利恵子理事に加わっていただき委員長は永田智子理事となった。2025年10月20日（月）に開催する研修会は3名の講師と各講師の正式な演題が決定した。更に、JANPUと合同で実施する「看護系大学に関する実態調査」に関し、入力マニュアル、質疑応答集の整理などを進めている。

(5) 渉外委員会

議長より報告があった。関係機関への要望書の提出を見据え、正会員へ向けてパブリックコメントの募集について通知した。要望書の提出は、現時点では次年度に向けて行うことを予定しており、具体的には12月を目安に関連団体と連携しながら検討を進めていく方針とした。

(6) 広報委員会

鎌田佳奈美理事より報告があった。会報第53号を2025年5月上旬に発行し、2024年度年次報告書は7月上旬に発行した。看護の魅力を社会の受験生や保護者に伝える活動については、2024年度の特別事業（「看護の魅力発信事業」）の結果を踏まえ、クリック数と視聴者数の双方において効果的だったTikTokとYouTubeを引き続き重点的に活用することを決定した。Instagramについては、予算と効果を勘案しながら、継続検討する。

(7) 将来構想検討委員会

本理事会終了後に、第一回目のヒアリングを実施すると荒木暁子理事より報告があった。

(8) 地区活動委員会

篠崎惠美子理事より報告があった。引き続き坂亮輔氏、渡部光恵氏に委員をお願いした。地区活動プロジェクトの応募は3件あり、申請内容と予算を精査し下記3件を採択した。

・北海道・東北地区（東北文化学園大学、岩手保健医療大学）「共に考える医療倫理～B型肝炎控訴原告団と弁護団の声を聞く～」
・中部地区（豊橋創造大学、人間環境大学）「看護の魅力発信！ 中学生対象 訪問型看護体験」
・九州･沖縄地区（九州看護福祉大学、帝京大学 福岡医療技術学部）「保健医療福祉系大学のメンタルヘルス不調休学者に対する復学支援プログラムの開発に向けた活動」

2025年度の地区会議は､2025年9月8日（月）に開催する。テーマは「地元で学ぶ、地元で活躍する：看護教育を通じた地域の絆」、場所は徳島県徳島市の徳島グランヴィリオホテルと決定した。

その他

大学教育委員会の太田勝正理事より、教員採用時の追加情報に関するアンケート調査について協力の依頼があった。

事務局からのお知らせ

2025 年度　研修会のお知らせ

■大学教育委員会

○新任教員向け研修会「大学教育とは」
動画配信中（2025 年 11 月 8 日まで）

○「看護系大学における特別な支援を必要とする学生への教育支援の実際」
開催日時：2026 年 3 月 1 日（日）
開催方法：（当日）会場開催、Zoom ウェビナーを用いたライブ配信
（後日）オンデマンド配信（3 か月間）

■研究活動委員会

○研究セミナー「EBN リサーチエビデンスと実装研究」
動画配信中（2025 年 12 月 22 日まで）

■国際交流委員会

○「在日外国人や来日外国人への看護」
開催日時：2026 年 1 月 31 日（土）
開催方法：Zoom ウェビナーを用いたライブ開催とオンデマンド配信

■大学運営・経営委員会

○「効果的な学生募集と私立大学における教育の質保証」
動画配信中

詳細はこちらから

編集後記

2025 年 7 月の定時社員総会で新規会員校として 2 校が加入し、会員校は 211 校となりました。2025 年度社員総会付帯事業講演会では「発達障害傾向のある看護学生への合理的配慮」について、日本赤十字北海道看護大学学長の安酸史子先生に講演をしていただきました。令和 6 年 4 月より大学・短期大学において障害者に対する合理的配慮の提供が法的に義務化されました。安酸先生には、発達障害傾向にある看護学生に対する合理的配慮の重要性や対応についてお話をいただき、特に対応については臨地実習指導の際に役立つことと思います。今後は障害を有する学生を含め大学において学生の学ぶ環境を整えていくことの必要性を改めて痛感いたしました。

本協会のホームページも常に刷新しており Instagram、TikTok、YouTube などの SNS を通じてアクセスでき、これから進路を選択する中高生にも情報発信を行うなど広報活動も活発に行っていますので、会員校の皆様も是非アクセスしご覧ください。

広報委員会委員　宮城　由美子

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