



Children are our future: challenges influencing the future of nursing care of CYP

Danielle Edge ,¹ Kerry Gaskin ²

10.1136/ebnurs-2024-104160

¹University of Plymouth,
Plymouth, UK

²Birmingham City University,
Birmingham, UK

Correspondence to:

Professor Kerry Gaskin; kerry.gaskin2@bcu.ac.uk

This editorial is structured using Driscoll's¹ 'what, so what, now what' model of reflection to briefly summarise contemporary challenges influencing the health and wellbeing of children and young people (CYP) globally and in the UK. These challenges are considered in more depth across the 5-week series of EBN blogs (1 – 29 September 2024) along with factors influencing CYP nurse education, delivery of intensive care, mental health and palliative care services.

What are the challenges?

CYP under the age of 18 years old represent 28% of the world population² and are 100% of our future. Globally, three major contemporary issues influencing children's health and well-being are the COVID-19 pandemic, climate change and countries in conflict. Save the Children³ data indicate that in 2022, 2985 children were killed across 24 countries and almost 200 million children were living in the world's most deadly war zones; this was the highest number in more than 10 years and exacerbated by the war in Ukraine. Furthermore, the number of children reported killed in Gaza in just 3 weeks, during October 2023, exceeded the number of children killed across the world's conflict zones annually since 2019.³ These non-medical conditions 'in which people are born, grow, live work and age' are social determinants of health.⁴

In the UK, social determinants for child health and well-being 'fall short' in comparison to international counterparts.⁵ During 2021/2022, almost one-third of children under 18 years (29%, n=4.2 million) in the UK were living in poverty and are, therefore, at risk of experiencing poorer health outcomes.⁶ The unprecedented rise in infant mortality in England over the last decade has disproportionately affected the poorest areas (2.4 times higher in the most deprived areas).⁶⁻⁸ Children living in the most deprived areas of England were twice as likely (31.3%) to be classified as obese, compared with children living in the least deprived areas (13.5%).⁶ Furthermore, the impacts of the COVID-19 pandemic on health and well-being, particularly on CYP presenting to mental health services are becoming apparent. During 2023/2024, 5.3 million CYP were in contact with mental health services, an increase of 8.1% compared with 2022/2023 and 25.7% compared with 2021/2022.⁹

So what are we doing about these challenges?

Understandably, the Royal College of Paediatrics and Child Health¹⁰ has urged the new UK government (elected July 2024) to 'take bold action on child poverty and health inequalities, mental health and, given the impact on children's health, air pollution'. Similarly, the Association of British Paediatric Nurses (ABPN) is advocating against child poverty, warning about widening health inequalities. ABPN President Professor Bernie Carter states 'each and every one of us involved in

children's healthcare needs to add their own voice; we cannot be silent'.¹¹

As CYP nurses we are uniquely positioned to influence the future of child health by understanding and addressing these complex and inter-related social determinants. The contemporary global challenges underscore the necessity of understanding the needs of CYP internationally, and these must be integrated into CYP nursing curriculums. Specialised skills and knowledge are crucial for comprehending the anatomical, physiological, psychological and social development of CYP from birth to adulthood.¹² The role of CYP nurses is pivotal in providing evidence-based holistic care, centred on the child in partnership with their family.¹³ Furthermore, a rights-based approach to care and understanding of the United Nations Convention on the Rights of the Child¹⁴ are essential for delivering child and family-centred care.¹⁵

In 1888, Wood, a children's nurse matron, stated, 'Sick children require special nursing, and sick children's nurses require special training',¹⁶ this statement remains relevant today. The most recent Nursing and Midwifery Council (NMC) UK nurse education standards¹⁷ included a move towards a lifespan approach and the removal of field-focused guidance. A recent study has revealed inconsistencies in child health content across undergraduate nursing programmes in the UK.¹⁸ Furthermore, concerns have been raised, by UK CYP nurse academics, about the potential impact of NMC standard changes on the specialised knowledge required by CYP nurses.^{12 19 20}

Now what?

In June 2024, leaders from more than 20 countries across Europe and Central Asia recommended increased support for parents of young children, recognised as critical for healthy child development.²¹ Access to essential health services for 250 million women, children and adolescents in the hardest-to-reach communities was pledged in the 'Deliver the Future' campaign²² and at COP28, World Leaders were urged to place children's rights at the heart of climate action.²³

In the UK, better-shaped healthcare service provision for CYP is required; the new government needs to prioritise the restoration of key services such as Health Visiting and School Nursing.⁹ Furthermore, the diverse population of CYP in the UK must be represented within healthcare services to reduce health inequalities. CYP nursing curriculums need to be reviewed to ensure that global challenges are integrated, adequately preparing the future workforce with a stronger focus on prevention and early intervention.⁹ Decolonisation of the preregistration CYP nursing curricula is necessary to enable effective change, involving marginalised and minoritised students and CYP nurses in this decolonising work.²⁴

X Danielle Edge @danniedge and Kerry Gaskin @GaskinKerry

Competing interests None declared.

Provenance and peer review Not commissioned; internally peer reviewed.

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ORCID iDs

Danielle Edge <http://orcid.org/0000-0001-9935-6418>

Kerry Gaskin <http://orcid.org/0000-0002-1179-4921>

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