

EDITORIAL

The ten articles published in this issue (13/2) of the Africa Journal of Nursing and Midwifery (AJNM) cover diverse healthcare aspects from a number of African countries: two articles each from Tanzania, Ghana and South Africa, and one article each from: Kenya, Malawi, Cameroon and Uganda. The topics addressed include the usual ones of Tuberculosis and HIV/AIDS. Women's childbirth preferences in Uganda and women's satisfaction with midwifery services in South Africa merit attention. The maternal and neonatal mortality and morbidity rates are unlikely to decline unless women utilise midwifery services. Factors influencing women not to use the available services should be addressed. Available services which are not accessible to women should become accessible by attending to women's needs. The treatment outcomes of neonatal asphyxia at one hospital in Tanzania, is also relevant to the continental drive to reduce neonatal mortality and morbidity statistics. As few children with congenital cardiac conditions are able to access surgery in developing countries, like Tanzania, educating their parents about their care and treatment, offers hope to enhance these children's quality of life.

Nurses are often the healthcare workers faced with the responsibility of providing cardio-pulmonary resuscitation (CPR), and studies about the effectiveness of these training programmes should be ongoing. Nurses' CPR competence, or the lack thereof, could make the difference between life and death during critical situations. A comparative study about the outcomes of a basic and an advanced life support programme, indicate that nurses who had completed the advanced life support programme, demonstrated better competencies than those from the other group.

Intensive care nurses and intensive care units are scarce throughout Africa. Nurses without specialised intensive care nursing qualifications render these services in some countries. One article addresses intensive care nurses' perceptions about their abilities to meet the needs of ICU patients' families. If the number of nurses is inadequate for meeting the needs of both the patients' and their families, then the nurses might experience these two groups of needs as being competitive, with the patients' needs being prioritised.

Most countries experience shortages of nurses. If the motivation levels of the remaining nurses are low, the challenges of providing adequate nursing care to any country's people are compounded. Factors influencing the motivation levels of nurses in Rwanda are addressed in the last article.

Ten articles addressing diverse health care issues, as researched in seven different sub-Saharan African countries, should provide all nurses and midwives with stimulating insights into similar healthcare challenges encountered in different countries.

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