

New frontiers: a global journal for a global issue

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We would like to warmly welcome readers to the *International Diabetes Nursing* journal. While this is a new journal, it is based on the legacy of the *European Journal of Diabetes Nursing*, which it succeeds. In many ways, the mission of the journal remains the same, to promote and share care innovations that make a difference to the lives of people with diabetes. However, in the new journal, we want to expand our horizons a little and provide a platform for clinical diabetes research across the globe. While the journal has a focus on nursing, it is of course not exclusive to nurses. As with diabetes care in general, it is recognised that inter-professional collaboration is important, and we welcome contributions from all health professionals. We encourage colleagues to submit clinical academic work to this journal so we can share and expand clinical practices that will benefit people with diabetes. Our ambition is to make the journal an internationally recognised resource for high-quality clinical research and practice. We will in due course be seeking to index the journal to expand its impact. However, for this to happen, we need to have high-quality submissions. So please spread the word and let us make this journal essential reading for all those who work with people who have diabetes.

While this is a new journal, you will see from the assembled papers that there are still many important issues in diabetes care that need to be addressed. Felton and Hall have an overview of the recently published *Policy Puzzle*.¹ This review highlights the continuing national variations and inequality in care provision across Europe. In particular, it shows significant variations in diabetes nursing with many countries not recognising diabetes nursing as a specialism. One important way that we can address this problem is by continuing to develop innovative care models to improve patient outcomes. This journal would like to be home to those innovations. In this first edition, we have some good examples of such innovation. Chithambo and Forbes also have a paper highlighting how a lack of structured assessment and educational support contributes to poor foot outcomes in diabetes.² Care delivery is always a challenge in diabetes especially when demand is always increasing. So a further innovation we see in the journal is that of the virtual clinic by Atkinson *et al.*³ The virtual clinic shows some promise as an intervention to better integrate specialist and primary care.

On a more introspective note, we are reminded of the growing diabetes epidemic by a study of risk factors for Type 2 diabetes, sadly the study by Yurtsever *et al.* shows

the elevated risk in a sample of nurses.⁴ This shows that nurses are not immune to the obesity trend that is driving diabetes prevalence. Clearly diabetes nurses need to rise to the challenge of diabetes prevention, and this an aspect of care that we would like to see more of in the journal.

We also have two papers on innovative practices to enhance diabetes self-management behaviours (Meldgaard *et al.*⁵ and Katz *et al.*⁶). These studies both highlight the importance of providing supportive education alongside technological innovation. While technologies can help patients to make better and easier decisions in relation to their self-management, they can only do this if they are activated and interested in using the technology. These studies illustrate how important this activation is in ensuring optimal use of technology.

So the journal is off to a strong start with some interesting studies. There is of course more to come in the next edition. But this journal wants, needs, your research and clinical innovations so that we can make the journal an important vehicle for knowledge transference and a resource that will stimulate readers to address the many challenges we have in meeting the needs of people with diabetes. Diabetes is a worldwide problem and we are now a worldwide journal, so we will be delighted to receive reports of clinical innovation from across the continents (North and South America, Asia, Africa, Australasia and Europe). While each country has its own context, the problems are often common so there is much we can always learn from each other. We hope you enjoy this first edition and the many more to follow, as ever do write to comment on the papers you read.

References

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