

# Our journal: Meeting a diversity of needs

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Collaboratively the WCET® Board and the journal publisher and editor are addressing MEDLINE indexing criteria to achieve our goal of being granted MEDLINE indexed status. In addressing the required criteria, we have for the first time, as published within this issue, stated the aims and scope of the journal, which are broadly reflective of the ethos of the WCET®.

On reflection of the stated aims and scope it highlights the diverse nature of the specialty of wound ostomy and continence nursing; the diverse challenges specialists in these fields face across the globe and within our respective countries, health services and health educational systems. Finally, it highlights the diverse range of peoples we care for with wound, stoma or continence issues within vastly different cultural and societal norms.

The diversity of something is defined by the fact that it contains very many different elements<sup>1</sup>. Diversity according to Queensborough Community College “is a reality created by individuals and groups from a broad spectrum of demographic and philosophical differences ...along the dimensions of race, ethnicity, gender, sexual orientation, socio-economic status, age, physical abilities, religious beliefs, political beliefs or other ideologies”<sup>2</sup>.

Diversity is also an inherent factor in healthcare that encompasses a range of differences in relation to patient demographics (disease process, gender, age, culture, and education) that in combination result in dissimilar needs and preferences, which may create both barriers and opportunities<sup>3</sup>. Leadership with healthcare organisations and professional bodies is required to assist health professionals to deal with the challenges of diversity in healthcare<sup>4</sup>.

Within our specialty, even our titles including enterostomal therapists (ET) and stomal therapy, stoma care, tissue viability, continence care or wound ostomy and continence (WOC) nurses indicates diversity. Whatever our titles, as nurses who are charged with providing effective evidenced-based, safe, person-centred care we are also expected to be able to manage diversity on a day to day basis by understanding, valuing and integrating a person's individual and differing needs and situations into the plan of care<sup>5</sup>.

WCET® as a professional body is committed to supporting life-long learning of nurses in our speciality globally through provision of the WCET® Journal. The scope of articles published within the journal reflects the diverse and often complex

nature of wound, ostomy and continence nursing. The benefits of shared expertise through publication within the Journal assists with managing diversity by providing insight into how patient, health service, educational or political barriers maybe ameliorated or provide opportunities for improvement across these arenas and assist with the practicalities of clinical care.

The range of topics within this current issue speak to the diverse and complex problems wound, ostomy and continence nurses deal with from a clinical, research and humanitarian perspective. Lee et al discuss the phenomena of drug induced Pyoderma gangrenosum, while Perez describes the complexity of managing multiple ostomies and fistula in a patient with bowel and bladder cancer. The association between ostomy adjustment and stigma within a Chinese population are identified by Xu et al. Point of care technology is explored by Smart et al whose exploratory research sought to validate no-touch infrared surface thermometry devices ability to predict wound-related infection.

We also celebrate our diversity through the continuing partnership with the International Interprofessional Wound Care Group (IIWCG) for which the WCET® Journal also serves as their official journal.

Translation of the journal into Chinese, and later this year into other languages, specifically for WCET® members further demonstrates the WCET® Board's commitment to acknowledging and meeting the diverse needs of its membership.

With Kind Regards  
*Jenny Prentice*

## REFERENCES

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