FOREWORD

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In this supplement of ACTA for health professionals, multiple points of view on the health professions aim to highlight the complexity of this professional field, its strengths and weaknesses. The Editorial Board's precise choice is to add value to the interprofessionalism typical of the healthcare world. The contributions here exposed, in fact, come from different kind of professionals: nurses, midwives, psychologists, doctors. The choice is to enhance this plurality of skills, emphasizing the added value obtained in the questions formulation and in the search for effective answers when these professionals are to interact and, in this way, to simultaneously activate multiple keys to read the complicated phenomena that arise within the healthcare context. Although the recognition of this added value may seem obvious, unfortunately in Italian daily practice we still find a strong resistance to the full use of interprofessionalism.

Often different professionals act on the same problem independently, without discussing and exchanging opinions, implementing multiprofessional but not interprofessional practices. This separation has strong cultural roots that are clearly reflected in the separation of the training courses: moments of common teaching in degree courses for doctors, nurses, rehabilitators, psychologists, and social workers are absolutely marginal if not absent.

The attempt made by this Editorial Board is to make available the same journal for different professionals that deal with topics that are of transversal interest in order to experiment an interprofessional research platform.

The articles in this issue, create a framework that includes the quality of life in the job context, dealing with a critical and delicate topic such as wards' lateral violence, aiming to draw a more defined conceptual framework, able to provide the basis for effective interventions in reducing the phenomenon. Another article deepens the theme of relational difficulties among health professionals, experimentally investigating the roots of these critical issues, providing an illuminating

paradigm on the possible dynamics in heterogeneous professional contexts.

The transition from the interpersonal to the intrapersonal sphere is natural, in an "integrated approach" mind set that alternates wide panoramic views with in depth zoom, trying to obtain a complete synoptic picture on health professions. Therefore an article focuses on the economic expenditure, proposing an effective method of nursing care cost and traceability analysis, in order to favour a high-level organization. However, other articles investigate the most intimate and profound areas of the professional, such as emotional and stress resistance, framed in a study of effectiveness of a narrative tool for the professional. In this supplement, the area of development of strategies and techniques available to the healthcare professional is also examined in depth, in accordance with a vision of continuous training, but always with a point of view considering an "holistic" care. One article focuses on the use of an innovative device to reduce pain in children undergoing venipuncture, another one assesses the use of narration to promote empowerment and adherence to the treatment of patients with chronic disease. Finally, there is also a more direct connection to the health profession, taking place with an "eye for patients". One article, then, focuses on the characteristics of patients receiving non-voluntary psychiatric treatment and another one reports outcomes of an intervention project carried out in Senegal aimed to prevent cervical cancer. From these articles emerges the salient role that the well-trained health professional can play in the prevention of serious conditions.

This issue, therefore, aims contributing to make tangible, indeed, "readable" the concept of organizational complexity together with that of holistic care, as they represent the "Rosetta stone" to interpret the contemporary healthcare professional context.

Prof. Leopoldo Sarli Dr. Chiara Cosentino