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Dear Editor,

Nurses who care for children and their families across the globe are practicing with at least some knowledge, albeit various descriptions, of what it means to deliver services that are “family centred.” The literature has been plentiful on the theoretical discussion of Family Centred Care (FCC). While some support the implementation of what the literature describes as caring for the family and child together, others are discussing the development of focusing on the child as the central focus of care. As these debates and scientific discussions abound, all pediatric nurses seek the scientific framework directly or indirectly to guide their evidence based practice in hospitals, homes and other settings worldwide.

To engage the scientific community in nursing that transects international lines, and to promote continued dialogue toward a mutual understanding of cultural, social and economic considerations of service delivery, a new child and family centred care research network has been launched. The International Network for Child and Family Centred Care was started in 2017 as a “call to convene researchers” to integrate and validate the emerging model of child centred care (CCC) (Carter, Bray, Dickinson, Edwards & Ford, 2014). The aim of the network is to ensure that CCC is fully defined, tested, and rigorous evidence of its effectiveness from an international multicultural perspective, in collaboration with consumers of healthcare, is available, before it is applied in practice. It is a “call to recognize” that FCC, as a service model, has never been properly tested (Shields, Zhou, Pratt, Taylor, Hunter & Pascoe, 2012), even though it has been used widely across the globe. It warrants open scientific discussions.

While in principle, FCC should be fundamental to the care of the child and family, it has been challenging to implement into every-day practice. Whereas FCC focuses on the family as the unit of care, in CCC, the child is the focus; the child is the key agent in family partnerships and collaborations with staff; and opportunities to make decisions about his or her own care are promoted. These concepts require a critical debate through an international forum of multidisciplinary child health experts, in synergy with consumers of healthcare – children and parents. We must develop the science behind CCC before it is implemented into healthcare services without compromising the family importance.

At present, there are 52 members of the collaboration across 13 countries, both Western and developing. Many of the contributors to this special edition of *Journal of Paediatric Nursing* are members of the new collaboration. We are building a body of knowledge, through collaborative research projects, and publications, in journals, conferences, magazines, social media etc., and with consumer groups for children and parents across the world. When we have a substantial body of work, we will lobby policymakers and politicians in order to provide the best care for children and families.

For further information, please contact the authors of this letter.

## References

Carter, B., Bray, L., Dickinson, A., Edwards, M. & Ford, K. (2014). *Child-centred nursing: promoting critical thinking*. Thousand Oaks, CA: Sage Publications.

Shields, L., Zhou, H., Pratt, J., Taylor, M., Hunter, J., & Pascoe, E. Family-centred care for hospitalised children aged 0-12 years. *Cochrane Database of Systematic Reviews* (update) 2012, Issue 10. Art. No.: CD004811. doi: 10.1002/14651858.CD004811.pub3