## Editorial

## Theo Gavrielides

elcome to the fifth and final issue of the 2020 volume of the *International Journal of Human Rights in Healthcare (IJRJ)*. What a year it has been! In the post COVID-19 era, human rights for health and social care have never been more needed. It is now a researched fact that those from Black, Asian and minority ethnic communities, as well as groups from low socio-economic backgrounds, are far more likely to get the virus. They are also more likely to die because of it. What is also now known is that COVID-19's socio-economic impact is deepening the visions between the powerful and disadvantaged communities.

Initiatives such as the IJHRH exist to collect evidences from around the world so that policy and practice are better informed and thus respond to communities' real and current needs. Our journal focuses on the most excluded groups, and I am proud to have served as its Editor for over six years now. Our mission could not be more timely and thus we have planned a special issue for 2021 titled Human Rights in Healthcare During COVID-19 and Other Pandemics. It is an honour to work alongside the Guest Editors Jan Michael Alexandre C. Bernadas (De La Salle University Manila) and Lee Edson P Yarcia (Alliance for Improving Health Outcomes) to prepare this timely special issue. One of the topics that will be covered in their collection is mental health. The virus had consequences for not only our physical but also our mental health. In fact, I am involved in a COVID-19 mental health project that young people from the UK run. This is provided as part of their youth-led FRED campaign (Fairness, Respect, Equality, Dignity), and offers a free helpline, a secure chat room, as well as food, other essentials and Personal Protection Equipment to young people who have developed new mental health issues or whose current ones worsen because of the pandemic. The project can be accessed from the given link (www.fredcampaign.org/covid19/). The evidences that we continue to gather through this project and since the lockdown are heartbreaking. Young people are 300% more anxious and stressed than before. They are worried about their future, exams and families, while many have lost their jobs. Some even declared self-harming, while those who were homeless or have no family were asking for help that our volunteers could not provide. I know that all these challenges are not unique to the UK, but are shared independently of where you are. How we respond to them is part of our obligation not only as an academic community, but also as a generation that should pass on a good future to our children.

In this new issue I grouped seven new research papers, three of which are from Pakistan and the last four from Iran. In summary, we have the following:

- 1. Association Among School Refusal Behavior, Self Esteem, Parental School Involvement, and Aggression in Punctual and Truant School Going Adolescents: A Multilevel Analysis.
- 2. Psychometric development and validation of attitude rating scale towards women empowerment: across male and female university population in Pakistan.
- 3. Indigenous need arise to protect human from self-harm behavior in Pakistan: translation and validation of inventory of statements about self-injury.
- 4. Observance of patients' rights in emergency department of educational hospitals in south-east Iran.
- 5. Use of ethical predictability in respect for human rights in Iranian hospitals with a 360-degree approach.

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- 6. Determinants of a high-quality consultation in medical communications: a systematic review of qualitative and quantitative evidence.
- 7. Identifying the inhibitory factors of dietary salt reduction in women: a qualitative study, Yazd, Iran.

Starting with Association Among School Refusal Behavior, Self Esteem, Parental School Involvement, and Aggression in Punctual and Truant School Going Adolescents: A Multilevel Analysis it examines a number of factors including self-esteem, father and mother school involvement in relation to school truancy in Pakistan. The research indicated that father and mother school involvement was related to more elevated level of self-esteem for school truant students. Results also indicated that male truant students had more significant probability to school refusal behaviour and physical aggression as compare to female truant students. Moreover, the research revealed that physical aggression fully mediated among mother school involvement, academic self and school refusal behaviour in punctual students and school refusal behaviour.

Subsequently, *Psychometric development and validation of attitude rating scale towards women empowerment: across male and female university population in Pakistan* looks at the attitudes that people hold towards women empowerment, which is defined as their ability to practise their rights, freedom and attain resources within a framework of gender inequality. The study aimed to develop an instrument to measure attitudes regarding women's empowerment in the hope that this can develop better understanding and future interventions to counter these negative attitudes for better social and health care. The paper argues that in Asian countries women are not given equal rights, because they suffer socially and economically from various problems attached to physical and mental health. By identifying the attitudes of the general population, their causes for attitudes can help in betterment of the women empowerment process.

Indigenous need arise to protect human from self-harm behavior in Pakistan: translation and validation of inventory of statements about self-injury highlights the indigenous need to counter self-harm behaviour. The paper used a sample of 30 individuals and further applied on 200 samples of DSH patients for factorial validation. The study concludes that self-harm is considered as a major health issue in the young population of the world and therefore, the investigated scale provides an assessment of DSH and intentions of performing self-injury to achieve a better understanding of such behaviours in DSH patients, which will help further to develop measures to prevent such behaviour.

Observance of patients' rights in emergency department of educational hospitals in southeast Iran used a cross-sectional research in four educational hospitals affiliated with the Kerman University of Medical Sciences in 2018. Using a two-section standard questionnaire of Patients' Rights Charter, this study concludes that the degree of patients' rights observance was moderate so, culture, paying attention to the rights of all stakeholders, identifying barriers and various factors should be considered by policymakers to design promotional and regulatory programs for improving the rights of the patient.

Use of ethical predictability in respect for human rights in Iranian hospitals with a 360-degree approach looks at concerns in relation to health-care organizations. The hospital environment and the flow of its processes make the topic of predictability much more sensitive and, at the same time, more difficult than other organizations. The paper is based on research with four hospitals, 938 patients and 186 staff in 2017. The measurement instrument was a questionnaire consisting of seven areas of service recipients' rights, patient safety, patient satisfaction, human resources, governance, organizational and financial commitments. The research found that ethical predictability was higher in social security hospitals compared to private and public hospitals, and patient safety and patient rights showed higher magnitudes compared to other dimensions. Identifying the factors which influence ethical predictability, in addition to promoting service recipients' rights and patient satisfaction can create a better

understanding of these factors and, consequently, make appropriate micro and macrodecisions to provide better services.

Determinants of a high-quality consultation in medical communications: a systematic review of qualitative and quantitative evidence argues that high-quality consultation is a fundamental right of every patient. Therefore, it aimed to identify factors affecting the high-quality consultation in medical communications. Qualitative and quantitative studies were assessed using the Critical Appraisal Skills Programme, Qualitative Checklist and the Center for Evidence-Based Management appraisal checklist, respectively. A stepwise approach was conducted for data synthesis. Of 3,826 identified studies, 29 met the full inclusion criteria. Using the indicators of consultation quality improvement can develop physicians' clinical competence and skills. Decision makers can use them to monitor and evaluate physicians' performance. The paper concludes that high-quality consultation can be useful in social prescribing that helps patients to manage their disease.

Finally, *Identifying the inhibitory factors of dietary salt reduction in women: a qualitative study, Yazd, Iran* aimed to identify the inhibitory factors of dietary salt reduction among 20-65-yearold women in Yazd City. Semi-structured interviews and focus-group discussions were conducted with 31 local women and 11 health-care professionals. Based on the COMBI framework, the results demonstrated that the most important barriers for reducing salt intake were negative attitude toward restrictions on dietary salt intake, insufficient and incorrect beliefs about the health risk of salt, lack of family support, inadequate health literacy and low self-efficacy. Among these barriers, lack of family support was considered as the most effective factor in reducing salt consumption. The study concluded that by providing the community with the required education, the amount of salt consumed by families can be reduced and thus their health improved.

I hope you find this final 2020 issue useful in your practice and research. Your feedback is always welcome; you can submit your views via our website www.emeraldgrouppublishing. com/journal/ijhrh?id=IJHRH#author-guidelines. We review papers on an ongoing basis and have a target of returning them to the author within 5-8 weeks of receipt. Warm wishes from everyone at the *IJHRH* and stay safe!

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