

An Investigation into the Curriculum Implementation of GNM Course, Revised Syllabus

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"My view... is that ultimate destination of all Nursing is the nursing of the sick in own homes....., I look to the abolition of all hospitals and work house infirmaries ... but it is no use to talk about the year 2000," Florence Nightingale.

The International Conference on Primary Health Care in Alma Ata, USSR declared that PHC was the Key to attain the targets of the health for all by 2000 AD. India is a member country of WHO that adopted global health strategy for health for all. Ministry of Health and Family Welfare evolved National Health Policy 82-83 in view of the national commitments to attain HFA by 2000 AD. The National Health Policy has given new direction that PHC is the focus of health system.

Since Nurse is an important person in health team and provides and will undoubtedly continue to provide, a large part of health care in most countries. So we need to prepare the Nurses for the newer and expanding roles. To do this INC has revised General Nursing and Midwifery Syllabus in terms of community health oriented syllabus in 1986. Investigator, working in this system, hit upon the question... "does our curriculum equip the Nurses with relevant knowledge, skills and attitudes necessary to render health care services to the community?" "..... to answer this significant question, investigator has taken up following study which was awarded for Ph.D. from Gujarat University in 1998.

Objectives

1. To identify physical facilities

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2. To identify curriculum implementation process and relevance of teaching-learning activities selected and organized by schools in terms of community health oriented education according to INC.
3. To gather the data through community health personnel about students' field training.
4. To gather information about Community Health oriented teaching-learning activities undertaken by the students.
5. To gather data through Nursing Teachers/PHNs about students' performance in Community Health Nursing practice.
6. To study students' attitudes towards Community Health oriented Nursing practice and training.

Formulation of Hypotheses

1. There is no significant difference between expected and observed frequency-responses of student Nurses about their performance on Community Health oriented Nursing task performance scale.
2. There is no significant difference between expected and observed frequency of teachers'/PHNs' observation of students' performance on Community Health Nursing task performance scale.
3. There is no significant difference between expected and observed frequency responses of student Nurses on attitude scale prepared by investigator.
4. There is no significant difference between the means of students' performance and Teachers'/PHNs' observations of students' performance on Community Health Nursing task performance scale.

5. There is no significant coefficient, co-relation between task performance scores and attitude scores of the student Nurses in terms of community health oriented Nursing practice.

Research Design

The investigator has used Evaluative Survey Method supported by field visits of Nursing schools and PHCs/CHCs as field training centres. The study was conducted in Gujarat State for 16 schools recognized by GNC and INC. The Principals (16), teachers PHNs (46), third year students (185) and field staff of PHC (20), total 267 persons formed the sample.

Tools used

To collect the necessary data, following tools were developed by the investigator.

1. Observational checklist for physical facilities at GNM training schools and field training centre.
2. Structured questionnaire about curriculum implementation.
3. Structured opinionnaire about students' field training and experience provided at PHC
4. Task performance rating scale for community health Nursing practice.
5. Observation rating scale about students' task performance for Community Health Nursing practice.
6. Attitude scale to study student Nurses' attitudes towards Community Health oriented Nursing practice and training.

Summary

For physical facilities the recognised schools in the state of Gujarat were grouped percentage-wise. Majority of the schools i.e. 80% schools had adequate and satisfactory



physical facilities in terms of school building, class rooms, demonstration room, offices for the principal and teachers, provision of transport, school records, clinical facilities (general), supply of articles and equipments and hostel facilities. Few schools that is ranging from 6% to 20% had poor physical facilities for above aspects.

But in terms of community health oriented training majority of the schools that is 80% had poor physical facilities for Community Health laboratory equipments and articles. Schools also had poor physical facilities in terms of auditorium, library, exam hall, offices for clerical staff, AV Aids (specially projector), clinical facilities (specialities), field training facilities etc. Few GNM schools, ranging from 6% to 20% had adequate and satisfactory physical facilities for above aspects. Transport facility was available on request whenever possible for the hospital to spare the vehicle.

2. Curriculum implementation process is evaluated against criteria laid down by INC. It is concluded that, the principal was considered the school administrator without the budgetary powers. It was found that schools were inspected by GNC and INC periodically. INC syllabus recommends M.Sc. qualification for the principal and tutor posts, as this programme is of 12+3 years, 'Diploma Course'. But none of the schools had teaching staff with desired qualifications. Only one principal was having M.Sc. qualification. Number of teaching staff sanctioned according to INC and 69% schools met INC criteria for teacher-student ratio. None of the schools had sanctioned non teaching staff. Mission schools had some clerical assistant for the schools.

3. It is concluded that PHC staff do take up responsibility of providing field training to students. Majority of the PHC staff reported that they could provide field experiences to the students for Community Health Nursing tasks.

It was found that few tasks, e.g. par-

ticipating in nutritional health services, prescribing simple medicine and treating minor ailments, participating in national mental health programme, participating in leprosy control programme, participating in cancer control programme, participating in AIDS/STD/VD prevention and control programme were not given due importance. Investigator felt, that the problems presented by field staff are real and suggestions to improve field training are necessary.

4. Student Nurses' responses about their performance on Community Health Nursing tasks are significant at .01 or .05 level and hence it can be said that students do get chance to learn those subtasks. Those sub-tasks which are significant at .01 or .05 level, but with the frequency responses leaning towards 'sometime' 'rare' and 'never' it can be said that, students could not get a chance to learn those sub-tasks. Not only that, those sub-tasks which are not significant at .05 are not performed satisfactorily by the students.

5. Teachers'/PHN's observations of students' performance on community health nursing tasks are significant at .01 or .05 level. And that says that students have performed those sub-tasks during training. Those sub-tasks, which are significant at .01 or .05 level, but the frequency leaning towards 'sometime', 'rare' and 'never' it can be said that students could not get chance to learn those sub-tasks. Not only that, those sub-tasks, which are not significant at .05 level are not performed satisfactorily by the students.

6. About student Nurses' attitude towards Community Health Nursing practice and training, concluded that observed, frequency leans towards 'SA' and 'A' for favourable items and 'D' and 'SD' for unfavourable items of all specific areas of "Attitude Scale". And hence attitude of student Nurses is favourable towards 'Community

Health' oriented Nursing practice and training.

It is noted that few items are of unfavourable attitude but observed frequency leans towards 'A' and 'SA' represents unfavourable attitude of student Nurses on these items of 'Attitude Scale'.

In general student Nurses' attitude is favourable towards Community Health oriented Nursing practice and training.

7. It is concluded that students' mean scores of their performance and the teachers' mean scores of observations of students' performance do not differ for following tasks.

Tasks 1 to 11, 13, 16 to 18, 21.

Means students' reporting about the performance and teachers' observations of students' performance for those tasks do not differ. Means both the groups match for the students' performance for Community Health Nursing tasks.

Students' means scores of their performance and the teachers' means scores of observations of students' performance do differ for following tasks. Tasks 12, 14, 15, 19, 20, 22, 23, 24.

Means students' reporting about their performance and Teachers/PHNs observations of students' performance for those tasks differ. Means both the groups do not match for the students' performance for community health nursing tasks.

8. It is concluded that there is correlation between performance scores and attitude scores of student Nurses for Community Health Nursing practice and training. It needs further investigations.

9. It is concluded that schools need to have physical facilities and resources for Community Health oriented training. And special emphasis is to be given for preparation of future Nurses according to the need of the community and nation.

Continued on Page 258