

Women's Health: Nurses Pave the Way

Mary Joseph

Introduction

THE theme for the Nurses' Day 1995, 'Women's Health: Nurses Pave the Way' is quite appropriate as it is high time for the Nurses to get reoriented on the specific issues of women's health to be highlighted from womb to tomb, where the nurses can play a vital role. In order to appreciate the role of the Nurse in paving the way to women's health, it is essential to explore the status of women in the society as well as the problems they face in the family and the community.

Status of Women

As it is correctly said the position of women in any society is a significant pointer to the level of culture of that society.

Women in India have a status inferior to men, which has been assigned to them for centuries because of various cultural values. The consequence of this inferior status has found expression in several forms: female foeticide, female infanticide, higher female mortality and morbidity, low life expectancy, lower literacy level, lower level of employment for females and an adverse sex ratio.

Discrimination against

women starts as early as the childhood itself. In a traditional family, silence is the women's language. Many of the women are not given a share in decision making. A woman is forced to be submissive, inferior and self sacrificing. In some cases, the sacrifices are so severe that a person becomes a non-person.

It has been noted that every day hundreds of adolescent girls are subjected to bonded labour, to marriage without their consent, to separation or destitution, to sexual abuse, prostitution, pregnancy and abortions.

The adolescent girls can lose their own identity due to the influence of the inconsistencies in the value system of the modern complex society.

In the present set up, girls are given all levels of education. The higher education and professional degrees acquired by women motivate them to work. In Kerala, the higher female literacy has contributed to the improved health status of the society.

Women's contribution to the economy is grossly underestimated and many hours that women devote to household work are simply discounted. Even though many women have achieved economic independence, social independence has not yet been achieved. Women are lacking in social security also. Education and employment has contributed to women's partici-

pation in politics also. Even then we meet many distressed women in the society who are victims of battered wife syndrome, broken families, etc.

The legal age at marriage of girls has been raised to 18 years. Even though there are laws to prevent giving and taking of dowry, it is still practised. A married girl is at the constant threat of divorce or abandonment for various reasons. She may become divorced if she does not bear babies, fails to bring the promised amount of dowry and so on. Dowry is a main cause of bridal death in our society. Women's holistic health is reflected in their status in the society.

The Problems

In this modern society, the multiple roles performed by women in the home and in the working place often lead to role conflict and stress.

In addition to having special health needs, women carry out extra responsibilities for health through their contribution to the health of their families and communities both formally and informally. The women are expected to be health educators to teach sound health practices to future generations and to create a home environment that is conducive to health.

It has been recognised that women are exposed to health

This article is prepared by Mrs. Mary Joseph, Tutor, College of Nursing, Calicut, with the guidance of Prof. B. Leelamma, Director of the College.

problems throughout their life cycle. Malnutrition, harassments, violence, uncontrolled fertility and hazardous child birth are some of the main problems which affect the health status of women.

Women's access to health services is also constrained by several factors. The time spent on child care, household work and in the occupational sphere leaves them with little time to think about their health.

Neglect of health and poor utilisation of health services increase the morbidity of women who are already disadvantaged with malnutrition, repeated pregnancies and problems arising out of child birth. These facts are supported by several study findings.

It is understood that women's problems are socially and culturally determined and the socio-cultural factors have a strong bearing on women's health.

Role of the Nurse

A healthy woman is an asset to the country by way of her contribution to national development.

From the holistic health point of view, we, the Nurses need to pay attention to the physical, mental, social and spiritual aspects of women's health status.

In order to achieve the target of child survival and safe motherhood, special attention should be given to women when she herself is a girl child because the girl of today is not only the woman of tomorrow on whom the health and well being of the

future generation depends.

We can act as educators so that we can make the family members aware of the importance of creating a therapeutic environment in the family where the girl child also experiences love, affection, understanding, recognition and security so that she should not receive the message that she is neglected or discriminated against.

The Nurse can play a very important role in helping the adolescent girl to successfully achieve her developmental task, i.e., development of her own identity.

We professionals need to emphasize on bringing up children with a purpose in life. The Nurse can direct the families to inculcate moral values among adolescent girls and to channelize their energy positively. This is very important in view of the current health problems such as AIDS.

Nurses may insist on sex education which is a scientific subject. We need to be very alert in providing family life education and education on planned parenthood for adolescent girls. Here comes the importance of premarital counselling where the Nurse can act as a resource person or a facilitator.

Vigilant and better approach to maternal and child health services need to be initiated by Nurses.

There is sufficient scope for the Nurses to help the women to overcome the risk factors such as early marriage, poverty and illiteracy. We need to emphasize on the need for physical and mental maturity for child bear-

ing and child rearing. The risk factors having bearing on the women's health may be seriously taken note of if safe motherhood is of any significance!

The aim of CSSM strategy cannot be achieved if harassments and exploitation towards girls and women are continued as a vicious circle. The Nurse can intervene and see that this chain is not continued.

There is sufficient scope for the Nurses to propagate the need for the total care of women through mass media. We need to stress on the social security needed for women. The Nurse can act as an advocate to influence the policy makers to implement the policies where women are advantaged.

Nurses need to develop more skill in counselling technique to deal with the psycho-social problems of women. The Nurses may realise that health education does not mean only physical health aspects, but the social cultural aspects of health too. The Nurse can be the role model in the family centred care.

The disease oriented approach of the Nurses needs to be reoriented to family centred approach, which is holistic where the Nurses can emphasise on the need for freedom of expression, healthy interpersonal relationship, involvement in decision making and delegation of household responsibilities: all these contribute to the holistic health of women.

Nurses can also make deliberate effort for making the women aware of their own potentialities and utilising these potentialities.

The health personnel, especially the grassroot level workers, require in-service education in order to equip them for the holistic health care of women.

Women's health problems are socio-cultural, hence changes can be made only through community participation.

We need to rethink on the Nurses' Day Theme, 1995, as enlightened woman is the power and she requires education, equality and emancipation which results in holistic health.

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L.T. College of Nursing SNDT Women's University Bombay-400 020.

NOTICE

Applications are invited for Master of Science in Nursing Course (2 years) commencing on 20th June, 1996.

- a. Candidates with 55% or above marks at the B.Sc. Nursing from any recognised University.
- b. 2 years experience after graduation of which one year should be in any clinical area either hospital or Community Health Nursing.
- c. Preference will be given to those who have at least 6 months experience in the area of clinical speciality opted for.
- d. In case of post-basic B.Sc. Nursing graduates, experience prior to their Post-Certificate B.Sc. Nursing graduation will be considered.
- e. Has registered with the Nursing Council in this state or any other state.
- f. Consideration to the SC/ST/DT/NT candidates as per Government rules.
- g. Candidates in service should apply through proper channel.

Admission will be determined on the basis of an entrance examination.

Application forms may be obtained on payment of Rs. 75/- by Money Order only from the Principal, Leelabai Thackersey College of Nursing, SNDT Women's University, 1, N.T. Road, Bombay 400 020. The last date for the receipt of the application forms duly completed is on or before February 28, 1996.