

Industrial Sanitation and the Role of Nurses

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THE city of Bhopal will remain as a horrible example to show how dangerous industrial pollution can be. It was here towards the end of 1984 that the world's greatest industrial disaster struck and took the lives of thousands of people, besides killing hundreds and thousands of cattle and caused extensive damage to vegetation. The leakage of the lethal Methyl Iso Cyanate from the multi-national Union Carbide factory at Bhopal, could have been averted, had there been proper safety measures and alertness on the part of the persons responsible for the same.

Any kind of environmental pollution causes harm to flora and fauna and the harm caused to the human beings is felt most, compared to the damages caused to animals and vegetation. It is our common knowledge that the village people have a longer and healthier life compared to the urban people, despite their poor economic conditions, because the village atmosphere is less polluted than the urban areas and the people in villages have lesser tensions compared to their counterparts in the industrialised areas.

Environmental pollution is severe in the towns which are highly industrialized because the factories situated in and near the towns produce various kinds of waste materials which pollute the atmosphere in varying degrees. Some pollutants are highly toxic and they become lethal to the flora and fauna including human beings.

Urbanization, even though is essential, has its own adverse effects on the living conditions of the inhabitants. Industrial processes release into the atmosphere contaminants, which, when inhaled, might damage the health of the individual. Dust, gases, fumes, mist, vapour and smoke are the major such contaminants. Mushroom growth of industries in towns cause a lot of waste materials, which, many of the small industries, dump within the city limits, without caring for proper disposal. Such wastes may cause pollution of water and air in the area. Transport system in the city also produce a lot of smoke and sound.

Industrialisation also leads to many community problems like rise in the number of slums, increase in the incidence of communicable diseases, mental and social health problems resulting in alcoholism, drug addiction, gambling, prostitution, divorce, break up of homes.

People working in factories are exposed to numerous hazards. The main physical factors in the working environment which have an adverse effect on health are heat, cold, humidity, air movement, light, noise, vibration, ionising radiation, etc. These factors may not only adversely affect the efficiency of the

workers, but also cause several illnesses to them. The pollutants of chemical industries are quite often highly toxic and they may prove lethal on several occasions. Spread of viruses and bacteria in the area may cause several diseases on a mass scale. The carriers of these biologic agents mainly pollute drinking water and contaminate food items.

Proper industrial sanitation has a significant role in preventing such hazards. In this context nurses can also contribute to a great extent in maintaining industrial sanitation in the area.

The nature of duties of the nurses give opportunity to come into close contact with a number of people who approach hospitals for medication. The people thus coming into contact may be either in-patients or out-patients, or a number of their relatives and friends. It is our common experience that the patients and their attendants, however highly placed in the social, economic and intellectual status they may be, adhere to the instructions and advice given by the nursing staff during their medication period. If we are sincere in maintaining the industrial sanitation, we can make use of such opportunities to advise the patients and their relatives regarding the necessity for maintaining sanitation in the area. It is observed that the advice given on such occasions has a long term effect and the people try to follow up the instructions for a considerably long period. The little things we do on such occasions, will collectively have a cumulative impact in maintaining industrial sanitation. I want to make these points a bit more clear.

While we undertake nursing in the hospitals and also during our other social contacts, we can enlighten the people regarding the causes leading to environmental pollution, their resultant harmful effects, and the possible remedial measures. Quite often we see that little carelessness leads to fatal accidents, and on the contrary, careful approach can make the life smooth and happy. Let me elaborate this point.

A sizeable portion of the industrial work force are not much educated and due to their ignorance and carelessness, several accidents take place. Hence, the nurses, while attending on their medical treatment, can advise them about the precautionary measures to be followed against the possible industrial hazards. A nurse, who works in the out-patient department, while removing a loose foreign body from the eye can caution the worker on the importance of using safety goggles. A nurse who cures the wounded can advise about the usefulness of wearing protective clothing, safety helmets, gloves etc. wherever necessary. While giving the first dose of tetanus toxoid immunization, she can impress upon the need for taking subsequent dose at prescribed intervals.

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The diabetics who come to take their periodical dose of medicines, or the hypertensive who comes to check his blood pressure periodically can be told about the diet control, physical exercises, regular treatment etc.

The persons can be advised about the necessity for keeping the work place neat and clean as far as possible. Most people do not care much for dust, which can cause serious diseases like asthma, bronchitis, tuberculosis, etc. which once started, may not have permanent cure. Industries engaged in the production of cement, cotton, etc. produce a lot of dust

and the workers engaged in such duties are liable to inhale dust for long duration. Such persons should be advised to use special masks. People may be cautioned about the ill-effects of contaminated drinking water and foodstuffs and may be advised to consume only hygienic drinks and eatables.

Quite often we hear of observance of 'Safety Week', 'Industrial Safety Fortnight', etc. in the industrialised areas. However, if the nursing personnel are really sincere in promoting industrial sanitation, the fruits of their efforts may be far more than the outcome of such weeks and fortnights.

Community Health Nurses Meet

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facility, recognition and rewards etc. need to be reviewed and appropriate measures evolved.

7. Role of a public health nurse at each primary health centre which is catering to a population of 30,000 has to be discussed and the need to create the post of public health nurse at each PHC.

8. The promotional avenues for the lady health visitors need to be introduced to improve career development.

9. The role of district public health nurse has to

be reviewed in order to shoulder the responsibility of supervision and MCH services at district level.

10. There is a need to upgrade the post of district public health nurse at the district level so that she can effectively function as a nursing administrator at the district level.

11. There is an immediate need to have a post of state level community health nurse to plan and organise and to supervise different categories of nursing personnel.

INCENTIVES FOR ENROLLING LIFE MEMBERS

Members who are helping in enrolling Life Members for the TNAI may kindly note carefully the changes in the criteria for awarding of incentives to members enrolling Life Members. The relevant TNAI Council Minute No. CL/88/2 (iii) as well as the criteria for awarding incentives to members adopted in the Council Meeting, 1987, are reproduced below for ready reference and comparison.

TNAI Council Minute No. CL/88/2(iii)

(iii) *Incentives to members enrolling Life Members.* The Secretary highlighted the points and difficulties in implementation of the new scheme of incentives as formulated in the last Council Meeting at Guwahati. It was decided to delete Clause (f) from the decision taken earlier. The clause to be deleted is given below:

"Only those members who qualify for the first level incentives, would be eligible for subsequent incentives. The count would begin afresh after an award has been given for particular level of incentives".

The old criteria will be applicable for all those who have already participated in the incentive scheme barring Clause (f) upto December 1989. Those who are starting afresh will be covered under the revised rules. It was also decided to reduce the period to two years for all levels of incentives.

Criteria for Awarding Incentives to members enrolling Life Members approved by TNAI Council in 1987

- (a) A plaque bearing insignia of TNAI be awarded to those enrolling 50 or more Life Members within a period of 2 years.
- (b) A Silver Medal be awarded for enrolling 100 or more Life Members within a period of 4 years.
- (c) A Gold Medal be awarded for enrolling 200 or more Life Members within a period of 8 years.
- (d) For receiving such incentives the TNAI would pay two IIInd class train fares, and the State Branches would pay the Conference fees. The State Branches may, if they consider necessary, honour such persons separately.
- (e) Members enrolling 10 or more Life Members in a year would continue to get letters of commendation by the President as at present.
- (f) Only those members who qualify for the first level incentives would be eligible for subsequent incentives. The count would begin afresh after an award has been given for particular level of incentives.