An Anti-Leprosy Day Feature

Eradication of Leprosy

The Role Staff Nurses Can Play

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"If it is heroic to plunge into rushing stream to save another life, it is the height of heroic patience to nurse back to healthy life a suffering patient and a Leprosy patient at that."

—Dr. R.R. Diwakar

EVERY one of us, young and old, rich or poor, owes a duty to eradicate leprosy in the interest of his own to avoid or get others not afflicted with Leprosy. Affliction with Leprosy means a social death in the eyes of a common man. We are still under the influence of the popular belief supported in the 2nd century by an ancient Hindu Physician, Charaka who stated that 'Untruthfulness of speech, ingratitude, blasphemy against gods, derision of elders, sinful action, the accumulated evil acts of past lives and antagonistic diet are the causative factors of Leprosy' This traditional opinion is unscientific. This had been disproved by Dr. Hansen of Norway on February 28, 1873 AD. He did discover the causative organism Mycobacterium Laprae of Leprosy. This is universally established as the germ that causes Leprosy.

Wiping Out Wrong Notions

Hence it is necessitated to see that this past cannot hold true to its spirits today. It is needed to wipe out wrong notions, misleading facts pertaining to Leprosy by individual, group and mass approach, so that a fearless (stigmaless) society can be helpful to volunteer patients at the place of clinics, in initial stage, so that a free India is evolved by the turn of the century through extension of their ongoing profession by wishphering through the ears of members of the family of the patient.

Leprosy has been feared very much by each member of the society in the whole of the world, that too very much in India. This hatred with fear (stigma) is present in every community. But this kind of stigma is not present for any of the other diseases. (Now, may be AIDS).

But this distinguished fear has helped many highly advanced, deformed patients to form their own groups. This can be conspicuously seen near maths, masjids and churches by groups begging with exhibits of bent limbs.

None of the Leprosy patients have developed sympathy from any one of the people at large. They are abandoned like anything. This horrible treatment given to highly advanced cases of Leprosy has made Leprosy patients in the initial stage to hide spread to others and to become beggars in the streets to join their 'brethren' in their latter years of life.

On account of all these events, a Leprosy patient is greatly deprived of the most valuable security in society. He loses his status as a member first. Then he is deprived of every other thing that you and I am not, viz., he cannot marry. Therefore, no question of parenthood at all. (This is most sacred and is deprived). Therefore no status and prestige for him even where he is absolutely non-infective (80% are non-infective).

Can we not imagine this great fear of Leprosy ?

In this context, Staff Nurses can be a best ameliorating person than any other and find change in attitude, behaviour and practice of members of the society towards Leprosy patients by extending their services at the hospital and thus help eradication by 2000 AD; without extra thrust of duty.

By Family Approach (Group Approach)

Every day members of the family of a patient (in the Ward) will group together. They come to you. You need not go to them. You will have invested greatest faith in them. (No Leprosy field worker will have done it). This in one of the finest opportunities provided by God to meet the family (the smollest group). This is the time at which you can whisper through their ears about facts of Leprosy and remove stigma (one of the essentials required for eradication). Mind yourself that you can bring changes. Turn wonders. This moment has the greatest impact on society. A hospital Nurse is a better Public Health Nurse than her counterpart in the field.

We wanted you to remind here that group approach has a better impact on the individual, when the individual is not by himself adept. Group sanction is needed to find change in individual.

By Individual Approach

You are the only person who will have been observing the naked body of the patient. You will be dressing him, you will be feeding him, you will be injecting him, you will be protecting him from bed sores.

Then you can find patches or any other sign and symptoms on the body of the patient.

In this his great moment of distress your instruc-

January 30, marking the death anniversary of Mahatma Gandhi is observed as Anti-Leprosy Day.

tions are admired the best by the patient. Your word carries more weight. You can motivate him for action.

Find, search for the patches on the body, direct him for treatment telling the consequences, i.e., deformity.

You are a motivator, and a great reformist of the society.

Mass Approach

Your Ward visitors are nearly ten times that of the patient lying in the bed. Therefore, permit Leprosy workers to keep the posters in the wards. This has our invaluable impact on masses.

Keep a bundle of pamphlets supplied by Leprosy centres and allow it to be taken by visitors by themselves.

Arrangement for T.V., if possible, be made.

All these three primary Public Health Care systems are at your disposal and will be in your premises for which you need not go out of your profession.

Therefore, suit this juncture to bring changes in society and make India free.

Your Uniform

This symbol of purity is an attractive dress. People will recognise you easily. They value you most; your care is needed. Your instructions have a great reception in the minds of the people.

So, when approached, a few words by you will turn the disease away.

You are sacred to patients, their family and to the people. Please introduce.

Because You are a Leader by Profession

You can speak to local people; you can speak to masses when invited to speak, speak in your associations. Write in your magazines. Help the patient. You can do many others like this.

You Can Rate Yourself this Way

1. Do you admit Leprosy patient in the general Ward if he is suffering from any other serious disease ?

If no, what is your reason for it ?

Do you think that it spreads to you ? Or, do you think that he is not liked by others ? Do you think the doctors do not like him there ?

2. Can you recognise an infectious or non-infectious patient ?

3. Did you speak to any family today on Leprosy ?

4. Did you notice any signs of Leprosy on any patient ?

5. Did you direct him for the patient ?

6. Do you practise good attitude and behaviour towards Leprosy patient ?

7. Do you discuss Leprosy problem with others ?

8. Do you distribute pamphlets on Leprosy ?

9. Do you persuade doctors to treat Leprosy cases ?

10. If you are a patient will you attend clinics ?

11. If you are living with a Leprosy patient are you afraid of him ?

12. Do you try to evict him ? Or, do you look into his welfare ?

13. Do you give talk on Leprosy to groups and individuals ?

14. Have you participated in Urban Leprosy Centre Programme ?

15. Have you permitted ULC staff to paste posters on Leprosy ?

16. Do you like to join Leprosy projects ?

17. Do you write articles on Leprosy in your magazine ?

18. Do you consider it worth having a ULC in the Hospital ?

19. Do you consider that Leprosy is a major problem ?

20. Do you think that you are an important person to eradicate Leprosy ?

21. Are you aware that there is a Leprosy centre attached to your institution ?

22. Have you ever visited it ?

23. Do you think Leprosy work is confined to Leprosy staff and not to you ?

24. Do you know the number of patients under treatment in your ULC ?

25. Do you consider that united effort by all the members of the staff of the Hospital is required to eradicate Leprosy ?

26. Do you know the initial symptoms of Leprosy ?

27. Do you identify an infectious patient ?

P.H.C. : A Panacea for Many Problems

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should realise that it is their own programme and they are the ultimate benefeciaries.

(e) Active participation of Health personnel is sometimes lacking and they do not identify themselves actively but work with fear of punishment and censures from their officials. This outlook has to be changed by due appreciation of their performance by offering them promotions, incentives, etc. if they are found otherwise qualified.

Conclusion

No doubt, Primary Health Care will ultimately prove a panacea for solving many health problems and risks like Infant Mortality and Morbidity, Maternal Mortality, etc. It is qualitiatively a different approach to deal with the health problems effectively. Unlike the previous approach of delivering the health services at the doorsteps of the masses, this new approach starts with the people and has been visualised by the health planners in India as "Placing People's Health in People's Hands". A dedicated team of well trained health personnel with an unending zeal and enthusiasm to withstand and overcome operational constraints and willingness on the part of masses to accept the services will go a long way to take our country to the road of progressive health, which eventually could bring into reality the long cherished goal of 'Health for All by 2000 AD'.