

Some Suggested Structural Changes in Nursing Education

by

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With the emergence of Health Assistants and Extension Educators in the Community Health field, there is an identity crisis in nursing profession. All educators and administrators of nursing are fully aware of this newly emerging threat to the very existence of nursing profession. But there is a tendency on the part of educators and administrators to shift the responsibility of such a situation to the health administrators in the country. With the result, the events that are heading for such a crisis are overshadowed.

We nurses are a special class of people for blaming others for our failures. Have we ever thought as to why such drastic changes have been brought about by the health administrators in our country? Let us analyse as to what is wrong with us and what remedial measures are necessary to keep our identity safe as a distinct nursing profession. In my opinion, our nursing education system has failed completely to produce the type of nurses needed for the toiling masses of our country. Our education has probably failed to cultivate an attitude of service and sacrifice in our students. Our education system has perpetuated a class distinction in our profession with the result that a vast mass of ANMs' and LHVs' are alienated from the rest of the nursing profession.

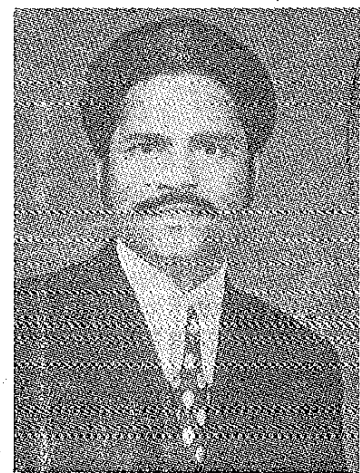
Our education system is such that it has always tried to train nurses for big city hospitals thus depriving the 80% of the masses of even bare nursing care facilities. If nursing profession is eager to retain its identity and to get a respectable place in the community, we nurses have to come down from secure four-walls of the hospital to serve the deprived masses. We have perhaps failed to do justice to the society by not meeting their felt needs. If we remain indifferent to the felt needs of nursing service for the masses, these new emerging categories are sure to take the place of nurses and nurses will probably be extinct from the health team in the near future.

Before permitting such an unfortunate thing to happen let us analyse ourselves, our functions and our education system and let us devise ways and means by which we can constrain such an unhappy thing to happen. Let us also admit that the image of nursing profession depends on the image of Auxiliary Nurse Midwife and Lady Health Visitor and Public Health Nurses in the rural areas. How could ANMs' and LHVs' work whole-heartedly knowing fully well their dead end future. We have for long neglected these P.H. functionaries who carry the message of nursing pro-

fession to the vast population of our country. In my opinion, fundamental structural changes are necessary in nursing education in our country for constraining the identity crisis which our profession is facing today. We have to use our educational resources in such a way that maximum gain could be achieved with minimum of resources. We have to take certain crucial decisions if we want our profession to be of social utility. We have to decide whether we want to train nurses for super specialities where only 5% of the population could be able to seek medical care or to train nurses who would render service to 80% of the rural population. To make our nursing education system socially oriented, nursing education has to change in its objectives, content and methods of teaching. Let us remember that our country is no longer in a position to invest in such a nursing education structure which trains nurses who are not fit to work in the Indian system of medical care. We have to train nurses who will work for our masses on whose hard earned money they are being educated. If we fail to realise this truth, society is likely to reject us as a profession. We have failed in the past and we are failing at present to meet the social needs of the community.

To resolve the situation of identity crisis, the following changes can be made in the nursing education system in our country, in my opinion:

(1) Basic Nurses—To train this category, high school graduates should be given two years of training in the system of 10+2. For this purpose our schools of nursing are to be recognised by the secondary boards of education. During these two years, offer a nursing curricula which will prepare them to perform basic duties in the field as well as in the hospital. Alongwith this nursing course, let the student select any one



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group of courses as offered under the new scheme. After passing this programme, they should be given secondary pass certificate as their examinations will be conducted according to the system suggested under the new scheme.

(2) Once these secondary graduates come out, offer them jobs in the community health hospitals as basic nurses to perform certain basic functions clearly delineated for them. Provision should be made that after serving for two years, they are eligible to get admission in 10+2(+3) course (B.Sc. Nursing). Those basic nurses who would like to remain in nursing profession would join this 3-year B.Sc. Nursing Course and those Basic nurses who feel that they are a misfit in the profession could join B.A. or B.Sc. according to the Course offered to them in 10+2. This will serve the following purposes :

(a) Further education opportunities would be available for Basic nurses either in the nursing field or in any other discipline.

(b) Only those basic nurses would remain in the nursing profession who are really dedicated to the philosophy of the profession.

(c) Nursing education will become a part of the general education system and the status of the profession will improve.

(d) By going through the courses in liberal education/science courses, the outlook and the frontiers of thinking of nurses will become very broad. With this the inferiority complexes from which we are suffering today may disappear.

(e) Our profession will have only two categories of nurses.

(3) Higher education should only be made avail-

able for the nurses who have proven records of service to the community either in the hospital or in the public health field. Higher education should not depend on the economic status of nurses. Those nurses who have proven their worth in the service of the community, ample fellowships should be made available and this is possible only when nursing education becomes a part and parcel of the general education system. In this regard Trained Nurses Association of India can play a very significant role.

Let us utilize the opportunities available to us under the system of 10+2+3 to prepare nurses to meet a felt social need. Let us join ourselves in the mainstream of general education and let us not shut ourselves in nursing colleges and schools which are completely alienated from the rest of the education system.

The present ANMs' should be brought into the general system of education by offering them courses which they lack according to the requirements of 10+2 courses. Study leave facilities can be provided to the candidates who are eligible. Those candidates who are not eligible for study leave, leave without pay with a service lien could be sanctioned. T.N.A.I. scholarships should be available to the needy and suitable candidates. Even international agencies such as WHO and UNICEF could be approached to provide help in this aspect.

These structural changes in the system of nursing education have become necessary and the sooner we are able to make, the better opportunity under the system of 10+2+3 is before us, and let us utilize this opportunity to make our system of nursing education up-to-date. It will be profitable to the community and satisfying and rewarding to the nurses.

ICN INVITES NURSES TO EXPLORE 'NEW HORIZONS FOR NURSING' AT 1977 CONGRESS IN JAPAN.

The International Council of Nurses will hold its 16th Quadrennial Congress at Tokyo, Japan from May 30 to June 3, 1977. The theme of the Congress is *New Horizons for Nursing*. The ICN invites all nurses who are members of the national Association to attend and participate in all the Congress activities. Student nurses are also welcome to attend. All members of the Trained Nurses Association of India are eligible to participate.

Highlights of the professional programme will include three plenary sessions featuring :

1. What's new in nursing practice around the world;
2. New approaches to education for nursing;
3. New dimensions of professional responsibility of nurses.

There will also be exhibitions and visits to hospitals and other health institutions organized by

the host association, the Japanese Nursing Association.

There will be a student assembly organized by the students themselves in Tokyo.

The Registration Fees are as under :—

	Nurses	Student Nurses
From the beginning of registration (July 1976) until February 26, 1977.	US \$60	US \$30
From March 1, 1977 until March 31, 1977	US \$80	US \$50

The application forms and other details on the Congress can be had from the Trained Nurses Association of India on submission of a self-addressed stamped envelope.