Psychiatric Nursing

Humanisation of Nursing

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"Everyone should know something of the society in which he lives. The great forces that mould contemporary civilisation, history, economics, politics, psychology, anthropology belong to group of social sciences. Whatever may be our specialised field, a general understanding of our social environment and of human institution is essential."

Dr. S. Radhakrishnan

OUR NURSING education must guard zealously against turning out more nurses who are mere technicians without sensitivity to human problems. The chief purpose of nursing today is to help the *individual* to attain or maintain *health*. The individual is not an automation or cold marble statue. He is a unique personality vibrating with life. He is a creation of biological, physical, psychological, social and cultural forces. The disturbance in any one of these forces results in his incapacity to function at his optimum (efficiency).

The WHO definition for health is : "State of complete *physical, mental* and *social* well-being and not merely the absence of disease or infirmity." The nurse according to the ICN definition is "a person qualified and authorised to supply the most responsible service of *nursing* nature for the promotion of *health*, prevention of *illness*, care of the *sick*."

Health cannotes not merely the physical but also the *mental* and *social well-being*, prevention of not only the physical but also of the *mental illness*, care of the sick does not mean only meeting the physical needs but *psycho-social needs* as well. But the question is whether our nurses today are in a position, by virtue of their training, to look after the mental and social aspects of health and disease to the same extent as they are trained to care for the physical aspects ? The answer to this question is a categorical *No* because their training is mainly oriented to biological and physical sciences and the technical skills whereas the knowledge of social/behavioural sciences and human-relations skills is considered to be trivial. This is obvious from the curriculum content of the schools of nursing recommended by the Indian Nursing Council where the minimum requirement prescribed for the basic sciences is 220 hours, out of which a mere 35 hours are devoted to the social sciences i.e., 20 hours for psychology and 15 hours for sociology and economics. These are not only inadequate but show the lack of importance given to these subjects. Yet the curriculum aims at comprehensive nursing care by the nurse.

Is it possible for the nurse to render *comprehensive nursing-care* to all her patients with such limited knowledge of psycho-social aspects of health and disease ? Does she understand the intricacies of human mind and the complex social structure which effect health and nursing care ? Can she meet the needs of patients with mental illness or meet the psycho-social needs of physically ill patient ? Does she recognise the manifestations of anxiety in a general ward ? Does she maintain a therapeutic atmosphere in the ward, an atmosphere which is peaceful, relaxed and free from interpersonal tensions, noise, boredom and traumatic situations etc. ? Is her own disposition cheerful, relaxed and calm ? How good is our nurse in the skills of communication, observation and reporting which are so essential for team work ? To give effective health teaching and nursing care does our nurse know the emotional needs of a child at different stages of its growth and development ? Can she teach the mother how to help the child to achieve mental health as much as she teaches for maintaining or promoting the physical health ? The assumption is that the answers to the above questions will be negative. This is unfortunate, but not surprising.

The comprehensive care needs a thorough understanding of man (body and mind) and his environments (biological, physical, social and cultural), in addition, on emphasis on nurse's understanding of and respect of *patient as a person*. But unless she herself gets that understanding and respect as a person during her training period, she will never be able to perceive the patient's needs objectively and comprehensively. During the training period a student-nurse is mostly of adolescent age which itself is a critical age. In addition, the process of nursing demands certain adjustment and adaptations on her part. During this period of transition the student nurse undergoes an emotional turmoil. She needs to solve her conflicts and master her emotions for which she should have an appropriate body of knowledge and the guidance of a mature person to help her in self-under. standing.

A nurse is in a unique position to have a direct, longest and mostly consistent contact with the patient and his family, with doctor and other members of the health team and with auxiliary worker and other domestic staff. Here she plays a role of a coordinator for which the learning of the human relations skills is most essential.

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