

Change—A Challenge

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In the modern society the most exciting and pervading element is that of "Change". We are going through a social, industrial and scientific revolution. It is an age of automation, computerization and space travel. We are faced with the problems of population explosion, disease, wars, nuclear disaster, poverty and lack of nutrition. It is also an age of innovation in the field of medicine and nursing.

Knowledge explosion and obsolescence of older information in every field of endeavour has brought about questioning of the traditional ways. Frequently man is faced with a conflict between the wish to adopt newer ways and a desire to preserve the older ones. It is not necessary that all our older traditions be forgotten, but, surely the intelligent human mind should analyse some of our traditions, sort out those which are important and relevant to the present-day life and society, and discard those that have become obsolete.

In the next decade, nursing will encounter some of the most interesting and exciting changes. To bring about changes and face the challenge of modern technology we require stupendous effort and energy. The discovery of antibiotics and several other drugs have completely changed the course and prognosis of many diseases, making the hospital stay of the patients shorter. The use of Cortisone, a wonder drug, has brought much comfort to many patients. Diseases like Cancer is now being treated with radiation therapy. New diagnostic methods, new surgical and medical techniques have helped in the battle against disease and ill health.

Tranquilizers, anti-depressant drugs, occupational and recreational therapy have revolutionized the treatment of mentally ill, unbalanced and disturbed patients. The discovery of vaccine, sera and other immunologic agent have controlled devastating epidemics.

All these innovations in medical field and the many changes in the society have had concomitant effect upon the nursing profession which has brought about many changes in the practice of nursing. The nurse-educators today believe that apart from clinical competence and manual dexterity necessary for performing nursing procedures and skills, a great deal of success in caring for both the healthy and ill depends upon qualities that belong to the realm of human relations. Humanistic and compassionate attitude and an identification with the consumers of our services have gained greater importance in nursing. Comprehensive nursing is yet another innovated practice in nursing. To give comprehensive care to our patients, in addition to knowing the diagnosis, treatment and management of disease, it is imperative to consider the patient and his total environment, comprehend his psychological make up and socio-economic background. Comprehensive nursing is not complete until we think of patient's rehabilitation which includes re-educating and re-training of the individual to suit his altered state of body and mind, so that he is able to live and earn his livelihood.

Today we are laying greater emphasis on preventive medicine, social medicine and community health. Early diagnosis, prompt

treatment and family health guidance are important aspects of public health practice. This kind of work will require community-oriented nurses who would be able to interpret and communicate both clinical and socio-economic findings to the members of the health team responsible for family health services.

One important criterion of any profession according to Flexnor is, that, it bases its practice on a body of knowledge which has been accumulated through research and experimentation. And this body of knowledge must be constantly enlarged with continuing research and experimentation by nurse-practitioner, nurse-educator and administrator. It is essential that even in our undergraduate programme students be given an orientation to research terminology and research methods in order to develop a questioning mind and problem-solving attitude. The planning, organisation and administration of medical and health services for the country will call for interdisciplinary co-operation, and co-ordination. Nurses with adequate background and education comparable to that of leaders in other professions will be required to be partners in administrative activities. All this, I think, can be achieved through organization of nurse-education programmes in institution of higher education like the University.

We have now come to a stage, where we have to think of transferring our training programme to Universities which offer the right type of climate for education of nurses. This may be a far-fetched idea, but such change is necessary if nursing is to stand on its own feet and have a voice in planning, decision-making and administration.

Having submitted my ideas of desirable change in nursing, I would now like to express a few thoughts about the obstacles and hindrances that come in the way of innovated practices. For this discussion we shall consider some of the psycho-social aspects of

change. The reaction to technological, social or any kind of change is often that of resistance, negativism and rejection.

Why do people resist change ?
How can we overcome negativism ?

When any change is suggested, people often feel uncomfortable and insecure. There is the fear of the unknown, there is the fear of the risk involved in change, and there is the fear of the results of change. Many societies in the past and many at the present time too do not allow sufficient freedom and encouragement to creative and innovative minds. Some activities have even gone to the extent of punishing their deviants, innovators, change agents and reformers. According to Bernard and Thompson changes provoke feeling of impropriety and defence attitude of ridicule.

It is more easier, both mentally and physically, to carry out and practice the accustomed patterns of life. This is specially significant as people get older, experienced in traditional ways and develop set ideas and values. Sociological surveys have pointed out that older individuals are more conservative, have less adaptability and are more resistant to change than younger people. In a study conducted in the U.S.A. a positive correlation between conservatism and age was reported by Sargent and Williamson. Not only among the older people but even among the younger generation there is always a conservative element which resisted change. There are some who would nostalgically stick to the past and its tradition. Their favourite phrase is "What was good enough for our fore-fathers is good enough for us." As Adinayayan observes they prefer to live on glory of the pleasant past rather than realize and meet the needs and demands of an uncomfortable present. For these people change becomes difficult resulting in resistance and rejection.

When people feel secure and less threatened then only changes will be accepted. Innovators can-

not expect acceptance of innovations in toto in a short time. There has to be diffusion of ideas and this takes time. Groups that are happy by status quo, are afraid to lose by innovation and naturally they resist and reject. If changes are forced upon people, resistance can and will often lead to negative motivation to work, low productivity and dissatisfaction, which in any organisation can cause disruption and chaos leading to high personnel turnover and confusion.

How can we introduce changes, and yet fulfil the psychological needs of people ? In introducing changes Hiley says, "We should allow those who are going to be affected by change the maximum opportunity for discussion and involvement in change. If this participation is neglected there may be resistance to change." Hiley suggests the following course of action for implementing changes :

"(i) Call a meeting of those involved ; (ii) State the problem, establishing the need for change ; (iii) Discuss the situation, placing no restriction on the freedom of the group to question you and to make suggestions ; (iv) Develop a plan for introducing change, incorporating the best suggestions put forward by the group and yourself ; (v) Seek the approval of the group for this plan ; (vi) Implement the change, but look for the development of any adverse attitudes among the group ; (vii) If these do develop, seek further consultation to iron out any problem areas."

Now let me pose a last question : What is the responsibility of the profession to support innovations and changes ? Dr. Ruano says "To fulfil its responsibility the nursing profession must support innovators by assuming responsibility in 3 areas. Firstly, the profession must encourage and reward innovators and deviants. Secondly, the isolation of the innovators must be immunized. Finally, it is the responsibility of the profession to both use and spread the knowledge that is generated by the nurse innovators."

It is my conviction that if Nursing Profession is to progress in the right direction, then indeed, the nurses of today must change, they must innovate and face the challenges of our modern society. As a result of these changes we may have to redefine our professional goals.

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