



Believe it or not . . . This I believe . . .

The Nobility of the Profession—A Hypocrisy

By Miss T. P. Philippose

I WAS relaxing over a copy of the Nursing Journal of India which has reached me in West Germany after four months. Still it was fresh news for me, fresh enough to rouse feelings of nostalgia. I read almost everything in the paper because it is all about India. It is all familiar, the people, the places, the language. I feel as a part of it all, and I feel a concern for what is taking place.

Some of the articles in the Journal are thought-provoking. The October (1973) issue of the Journal carried an editorial published in the Deccan Herald which starts by stating: "Nursing is a 'noble profession' but it has, in our country, yet to be accorded the status and respect it is entitled to. 'This is old stuff' is my immediate reaction. It has been said before, many times, publicly and privately, and it has always been a cry in the wilderness! Everyone is aware of the general attitude towards the Nursing Profession in our country, but the fact that it has to be repeated again and again reveals the depth of hypocrisy. Hypocrisy dies very hard.

I thought of my own experience as a student nurse, not long ago. Among other things, we were taught to respect the "dignity of the Person." Patients were not to be handled as things. How admirable in principle! Obviously, dignity is an essential condition of being human, but, may be, only some lose it, when they take up a profession, and that too, a "noble" one! Irony? Is it? Well, some social values in our country are ironical, and yet they are there for obvious reasons. They help a powerful section of the society. Everything and almost everyone connected with the medical profession are noble and dignified. Patients have dignity because they are human;

doctors have dignity because it is thrust upon them: Nursing Profession has dignity because everyone says so. Only the "person" of the nurse who carries the burden and gives continuity to the profession seems to be left out of the list of honours! She is always at the periphery of importance, at the bottom of the scale of social values. She is lectured to, reprimanded, corrected and sometimes even 'used'. She is always made conscious that she lives in the midst of a society in which dignity of labour is enjoyed only by a few professions.

I am reminded of an incident which took place when I worked with a lady doctor in the Delivery Ward. Details of the incident are not important, they are common place and quite human. The lady in question was a highly qualified doctor. She was the presiding deity in our Delivery Ward. For reasons which I am not quite conscious of, I had failed to humour her during the early days of our association and her attitude clearly showed that. She often glowered at me, spoke rudely when I went to see her, and was curt when politeness was more in order. I was afraid of ruining a career and a service that gave me a great deal of spiritual satisfaction. And so I kept clear of her orbit as much as possible. But on a dark day, the Sword of Damocles came down with a clang and almost cut my professional life into pieces. One day I had to choose between sympathy for a suffering patient and strict adherence to a rule. Sympathy prevailed as there was no time to get permission. I assumed that commonsense played a role in such situations, but commonsense becomes "uncommon nonsense" when animosity has taken root in human hearts! And so there I was

head bowed, hands folded and silently listening to a barrage of accusations punctuated with snide remarks, insulting, humiliating and spinechilling. I stood there holding down my self respect that rebelled inside me. But a moment of indiscretion broke the discreet silence and a word of self defence escaped my lips. And that brought down what looked like the last straw! I was accused of being insolent and of answering back to a doctor. "What does she think she is..... she is just a nurse.....she should apologise." A doctor can keep her big, fat ego; break the norms of justice and common decency; insult a co-worker with impunity and get away with the luxury of an apology! This is strange logic. I survived in my profession through the timely intervention of a person who thought more of "persons" than of professions.

The incident as such hardly deserves attention. But "she-is-only-a-nurse" attitude is hardly compatible with the human dignity we have been drilled in as nurses and the nobility of the profession everyone talks about. Such attitudes and the hypocrisy inherent in them are the "driving force" behind the mass exodus of people who look elsewhere for dignity of work and equality in service.

Anyway, the effect of that show down now is history for me and there is no bad blood left anywhere. If nurses are victims of social discrimination, those who "victimise" them are themselves victims of a social convention. And so, while attitudes control social behaviour and society divides and rules individuals, I read on in the Journal with the comforting thought that here, in the West, in spite of isola-

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