Needs of Students, Patients and Community

Panel Discussion on Nursing Education

Students of St. Theresa's School of Nursing, Hyderabad participated in Panel Discussion on 'Is the Present System of Nursing Education Meeting the Needs of Students, Patients and Community ?' : The *Moderator :* Sr. Mary Luke, 2nd year student ; *Participants :* 1. Miss Sudha Rani, 4th year student. 2. Sr. Arokya Mary, 2nd year student, 3. Miss Juvitha Mayr, 2nd year student. 4. Sr. Savariammal, 1st year student.

Introduction :

AS there are a number of systems existing in Nursing education, we plan to cover in this panel, only a few main systems of existing patterns of Nursing education, how far each one of them meets the needs of the students themselves and patients and the community at large.

The ultimate goal of any profession is to improve practices of its members, so that services provided by them will have the greatest impact. Scientific and technological advances made through research, educational seminars, workshops and conferences of this type, are some essential aspects of development of a profession. We are indeed glad that the Nursing leaders of our country are now seriously thinking about the inadequacy of the present system of nursing education, and ways and means of bringing about the necessary changes.

Change, as we know, is always a challenge, and before affecting it, we ought to think deep, read wide, discuss in detail, the pros and cons of the change in questions. So, in this panel discussion we are going to share our views on the topic, 'Is the Present System of Nursing Education Meeting the Needs of the Students, Patients, and the Community', and if not, what changes can be brought about in the present system of Nursing education to meet these needs.

Chairperson : Miss Juvitha, could you tell us what are the various systems of Nursiug education existing in our country.

Miss Juvitha : Yes, Madam Chairperson. In India we have about five basic Nursing education programmes, and four post-certificate or post-basic courses.

The basic nursing education programmes are :

	Entrance qualifications	*Duration*
1. Certificate course in General Nursing and midwifery	Intermediate pass or equivalent according to I.N.C. Although in some States it is still 10th pass.	3½ years
2. B.S.C. Nursing	Intermediate or its equivalent	4 years
3. A.N.M.	8th Standard	2 years
4. Multipurpose health workers course (Female health workers)	10th class	18 months to 2 years in some places
5. Health Visitors	S.S.L.C.	2½ years
B. Post certificate course or post basic course :		
1. Post-Certificate course in education administration and clinical Nursing including Public Health Nursing.	R.N.R.M. with 2-3 years experience	10 months
2. Post-certificate B.Sc. degree in nursing	Intermediate or equivalent, and R.N.R.M. with 3 years experience.	2 years
3. Masters in nursing	B. Sc. Nursing with 2 years experience	2 years

Miss Arul : Besides these recognized systems of Nursing education in our country, there are a number of categories of people who are doing Nursing service, such as, Village Health Workers, the trained and untrained Dais, Nursing aides in the hospitals, and the so called barefoot doctors in the community.

Sr. Savari : Madam chairperson, I feel the existence of so many categories of people in profession causes a lot of confusion in the practice of the profession by overlapping of their functions. This may be the reason why in foreign countries they have only two categories of nurses ; one, the professional nurses for administration of Nursing services at the bedside or in the community, and the other, Nursing assistants or technical nurses.

Chairperson : Yes, we in India do realise the inconvenience and disadvantages of having too many categories of Nursing personnel and hence we are making a move to reduce them. The A.N.M. course is now completely stopped in many states and is replaced by the Multipurpose Health Workers course. There is also a move to replace the General Nursing course by the B.Sc. Nursing degree. Let us hope that we achieve this goal in the near future.

Sr. Savari : Madam Chairperson, Miss Juvitha has mentioned about eight different types of trainings existing in our country, Could you kindly tell us, which are the systems from which the greater bulk of nurses are produced, so that we can concentrate our discussion on these systems in particular ?

Chairperson : The greater number of nurses come from the General Nursing training, that is, from the hospitals, Schools of Nursing and the A.N.M. training centres or the present multipurpose health wor-

kers' training programmes.

Miss. Arul : May I add that these days there are many Colleges which prepare nurses at a degree level. Therefore, it would be better if we include this category too in our discussion.

Chair person : We shall do so. Now, Miss. Juvitha, could you tell us how far the A.N.M. training meets the needs of the students ?

Miss. Juvitha : Yes, Madam Chairperson ! This course was established to replace the various courses for junior grades in Nursing and Midwifery, and at the same time to utilize the training facilities offered by hospitals, for students who are not qualified for the General Nursing course. The main purpose of this training was to prepare the student to function as a member of the Nursing team and deliver health services either in the hospital or in the home. Mainly, it was for delivery of health care in the community. But here we find that most of these training schools are affiliated to hospitals in the cities. Therefore the candidates who come out of this course prefer to stick on to the district or city hospital; and very few extend their services to the villages. But from the training point of view it prepares the student as a practical nurse for both hospital and home situation within a period of two years.

Miss Tessy : How does this fulfil the needs of the student ?

Miss Arul : May I answer that question please ? As Miss Juvitha mentioned about this course, preparation of these nurses seem to be adequate today. In fact, I have heard that some of these nurses are capable of managing excellently well especially in the labour rooms. But they themselves are at a gross disadvantage because they have no standardized pattern to help them, to upgrade themselves. They have absolutely no scope of pursuing further studies. It is known that these days due to a large number of general nurses graduating from the various schools, these A.N.M. nurses are at a loss, because many reputed institutions do not like to absorb them. So, now they really feel the necessity to upgrade themselves. For this, they either have to undergo a complete General Nursing course for three and half years or less than that according to the discretion of the institutions concerned. Fortunately, or unfortunately, many of these Schools are being closed or being replaced by either General Nursing course or the multipurpose health workers course.

Chairperson : Can Sr. Luke enlighten us on the present trend of Multipurpose Health Workers' course ?

Sr. Luke : Yes, Madam Chairperson ! Multipurpose Health Workers' course was initiated to prepare the students to meet the health needs of the community. Though it was started with plans of vocationalization of general education it has not been functioning that way. It was proposed that this training programme must fit into the higher secondary education system at the intermediate level. This means it is to be blended with the general education, so that at the end of the two years of intermediate or the higher secondary the student has two options. One is to work as a health worker and the other is to go for further studies. Another important fact is that if blended with the intermediate course, the student can further her education either in the same field, or in any other field. Further, by this type of a course, we can train a large number of students. This can help in rendering services to the community because there are chances of many students taking up the opportunity to work as Health Workers due to the easy availability of the job.

I would like to emphasize that the syllabus for this course is really an extensive one and prepares the student with a sound foundation. So, if this training is implemented as planned originally, that is, to merge it into the 10+2+3 system, it will be a highly advantageous one.

Miss Juvitha : May I ask you whether this course is being implemented anywhere in the country as proposed ?

Miss Tessy : Well, the sad part is that right now the training is for eighteen months and is very much a stagnant one because an eighteen-month course cannot be merged into the intermediate level of education and therefore the students are at a terrible loss. In addition to this the course that is proposed, cannot be covered in this period of time. Apart from this, the chances of pursuing further education does not exist at all as it does not possess an academic value. I would like to say that it is being very unjust to the students, with this course carried on in this manner. The only state which has introduced Nursing at the intermediate level is Tamil Nadu but I understand, if I am correct, they too had some problem with the recognition from the Nursing Council. So, it can function, and fulfil its objective only if implemented as proposed, by blending it into the 10+2+3 system and if both the Intermediate Board and the Indian Nursing Council agree to recognise the certificates so earned.

Chairperson : Thank you very much for your valuable contribution. Now, Sr. Savariammal, would you like to enlighten us on the various aspects of the education system, in General Nursing ?

Sr. Savari : Yes, Madam Chairperson ! comprehensive health service which India has committed to bring within the reach of all, demands high standard of Nursing practice, and it is expected that the Basic Nursing course makes provision for the continued development of the student as an individual as well as a nurse capable of functioning effectively in the hospital or in the community. Today there stand many doubts regarding the prevailing system of Nursing education, about its achieving the principal objective in the Nursing profession. Diploma Nursing seems to contribute the maximum to the least effectiveness in the profession, as a high percentage of nurses come from the three and a half years training programme after passing Intermediate examination. According to the present system of education, a student nurse covers minimum eight hours of the day, learning either

through clinical or class room teaching. She appears for Board examinations thrice during the entire course. At last what she earns is either a certificate or a diploma. Whereas the trend in the stream of General Education is different, a student of B.A. or B.Com undergoes only three years of training putting a maximum of six hours a day and earn a degree with a university recognition. This type of discrimination creates a lot of dissatisfaction among nurses.

Miss Javitha: I understand your point, but can you explain, as to what difference does it make to a practising nurse?

Sr. Savari: An interesting question indeed. Because General Nursing education has got no academic value, the basic qualification of a nurse remains intermediate even after the successful completion of three and a half years of training. This is a hindrance in the way of her taking up higher education, whereas her counterpart who undergo a three-year degree progrogramme earns a degree with all the scope of having further education. Even if a General Nurse wants to upgrade herself to BSc. Nursing level she should have three years of work experience after General Nursing, and then undergo two years of training after completing her intermediate if it is equivalent, either by regular or private studies, if her basic qualification was only S.S.C. at the time of Nursing entrance.

It is crystal clear that this is a big waste of time, money and energy. So, one can very well say that the prevailing education system for General Nursing does not meet the needs of the students in this programme. In this progressive society where everyone has the right to grow and develop oneself further, only the nurses have no scope for the future.

Chairperson : Thank you very much for your contribution.

Miss Tessy : With your permission, may I say something about the extent of fulfilment of hospital needs through this course ?

Chairperson : Please go ahead.

Miss Tessy : Nursing education at present is mainly a training through services. So, the present system is violating the law of patients' rights which says that every patient has got a right to be catered to by a fully qualified nurse.

Although the present system is demanding the basic qualification as Intermediate, certain states like Andhra Pradesh still consider S.S.C. as the minimum qualification. Therefore, the foundation laid is not sound. Whereas the entrance qualification for any other professional course is Intermediate, it is ridiculous to think, a profession like nursing, to which human lives are entrusted is quite satisfied with S.S.C. as its Minimum qualification ? As the edifice is weak we cannot make a solid construction.

Secondly, there are many branches of Nursing science which are not covered in this course like Genetics and Forensic Nursing. So, the hosptial can not utilize the diploma nurse in these fields.

Chairperson : Thank you Miss Tessy. May be Miss Juvitha can give her views about the contribution of this course towards the community or the society.

Miss Juvitha : Thank you, Madam Chairperson ! In the curriculum of General Nursing, public health is added as an integrated subject, and not much importance is given to this aspect during training.

General Nursing training is more hospital-oriented than community-oriented. For a diploma nurse to qualify as a Public Health Nurse she or he has to undergo a special training. As such, it is hard to find these diploma nurses in the community. In India 80 per cent of the population resides in villages. These 80 per cent are deprived of the services of general nurses who are the maximum in number in the profession. So, we cannot say that the present system of education is meeting the needs of the community at large.

Chairperson : Thank you, Miss. Juvitha, for enlightening us about General Nursing course. Miss Sudha, can you tell us something about B.Sc. Nursing ?

Miss Sudha : Yes Madam Chairperson, I am glad to say a few words. As the science and technology progress, there is also rapid progress in the field of medicine. The existing system cannot satisfy the demand and it calls in for better trained personnel.

The first colleges came into existence in Delhi and Vellore, almost simultaneously in the year 1946. These were started to give comprehensive Nursing care in the hospital and to meet the needs of the community, as the diploma holders were inadequately trained to give the needed Nursing in this field. The basic qualification required to get admission to this course is Intermediate.

The best qualified nurses after graduation prefer to go for administration, or towards the teaching side. Thereby they lose contact with patients as they hesitate to work at the bedside and thus education is not utilised in the form of services. The most sophisticated methods of doing certain procedures are taught in the class rooms as well as in the hospitals; but the chances of implementing them in the wards are few, because of the non-availability of the articles.

The graduates, after completing their education, have to wait for two years to go for further education in Nursing. This causes a real disadvantage. As the facilities and the requirements are less in the villages, the graduates refuse to go into the field of Community Health. This is a loss to the community.

Miss Juvitha : Are the B.Sc. Nurses qualified for teaching and administration ? In General Education no graduate can take up teaching unless he or she does the teachers' training or the B. Ed.

Miss Arul : Yes, it is true that a general B.A. or B.Sc. graduate has to undergo B.Ed. to qualify himself or herself as a teacher. But it is a fact that in the B.Sc. Nursing course there is a lot of content of teachers training and administration. As such, a B.Sc. nurse is exposed to some amount of training in teaching and administration.

Miss Juvitha : But, Madam Chairperson, I feel

this type of integrated training is not sufficient to train teachers and administrators. It would be advisable that the B.Sc. Nursing students after completion of these degree courses undergo a six month course to qualify themselves as firstlevel teachers or administrators.

Miss Juvitha : Madam Chairperson, I feel that the B.Sc. nurses have a lot of theoretical knowledge, but do they have adequate clinical experience ?

Sr. Savari : Madam Chairperson, I would like to answer this question.

Chairperson : Please go ahead.

Sr. Savari : In fact, this is a misconception. It has been proved beyond doubt that they have adequate clinical experience. Because the colleges are not situated in the hospital campus, like the hospital School of Nursing, and the students are not seen round the clock in the wards, we get this wrong notion about the programme.

Miss Juvitha : Madam Chairperson, should the diploma holders study for four years to get a B.Sc. Nursing degree ?

Chairperson : No, there is a condensed course which is of two years' duration. May be Sr. Luke could elaborate on this.

Sr. Luke : Yes, Madam chairperson, I would like to. The two-year degree course is a condensed course. This was set up to encourage the diploma holders to upgrade themselves. The subjects covered in four academic years in the Basic B.Sc. Nursing will be covered in this course in two years.

The students, to gain admission to this course, have to complete their diploma and then have three years of work experience. In the meantime they have to pass the Intermediate also if they are only S.S.C. holders and then study for two years to get a degree in hand. By the time they get their first degree they reach the age of twentifive. But their counterparts get their degree within the age of twentyone. This is a great injustice done to the students, and a mere loss of state exchequer.

Since this is a very convenient system, many students come for this type of education. But the theoretical knowledge gained in General Nursing is superficial and as they lack an in-depth knowledge of science and technology, it is difficult to add newer knowledge. Moreover, what they had learnt in the younger age remains with them and it is often difficult to make changes on what is already learned by constant practice. Hence, I feel the four-year degree course is more economical, practical and effective than the two-year condensed course after General Nursing.

Chairperson : As we have completed our discussion on the various aspects of the present system of Nursing Education, I am sure the audiance have several questions to be clarified. The panel is now open to the floor for any questions, clarifications, or contradictions. If no more questions and clarifications, I would like to wind up this presentation.

Conclusion

In conclusion, I would like to say that neither the General Nurses' training, nor the Multipurpose Health Workers' training, as it is conducted today, meet the needs of either the students, the patients or the community. With some more modifications the existing systems can be adapted to meet the above needs. Even in the B.Sc. Nursing programme the four-year Basic degree Nursing course seems to be more feasible, effective and economical.

Regarding the Multipurpose Health Workers' course, the existing eighteen-month course could be extended to two full academic years. The system could be brought into the general stream of education in the junior college level, giving it an intermediate value. At the same time a Nursing recognition could be given by the Nursing Council. Then the products coming out of this course could work as nurse assistants in the hospitals or in the communities. We could produce large number of such technical nurses in our existing Junior colleges and thus overcome the deficit of technical nurses. The more intelligent ones coming out of this course, scoring good percentage of marks could go for the Basic degree course in Nursing. Nurses who are trained thus at the degree level could take up more responsible work in the clinical field. Those who are coming out of this course, and are still ambitious of going higher can take up specialisations according to their taste at the Masters level, who could take up leadership positions in the professional field.

Thus, the whole Nursing Education can be brought in the general stream of education and anyone who has taken up Nursing has scope for ascending high on the ladder of professional education, according to one's intelligence and ability. This type of an educational system will not alienate Nursing and nurses from other professions and professionals. Another advantage of this system is that the public will get services from better knowledgeable people who can integrate their theoretical knowledge with practical situation.

Regarding existing general Nursing course, if we could convert this course into ones of about two and half or three years' duration at the degree level giving a B.Sc. degree, the students do not feel that they are penalised for taking up a professional course. They neither have to waste their precious time nor the state exchequer.

Another advantage of this system is that Community Health Nursing is learned as a separate subject in the degree level and hence any graduate nurse can also work as a community health nurse without taking a separate training which again saves some time and finance.

Coming to B.Sc. Nursing programme, the syllabus and course seem to be quite adequate and the programme is producing nurses with adequate scientific knowledge who are capable of integrating the theoretical knowledge with practical situations. But it would be helpful if the qualified general nurse could take up her graduation straight if she so desires. The fact that two years of experience is required before pursuing the degree course prevents

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of health care and it should include nutrition, family planning and family welfare, care of mother and child, personnel and environmental hygiene, and treatment of common minor ailments. This should be a sort of family self care.

5. The nurses should prepare the school children to take up leadership in various situations such as giving first aid, home nursing, cookery, baby care, care of aged, population education on the health principles and maintenance of family health. By proper instructions these young boys and girls are formed into promoters of Primary Health Care.

6. The present health professionals must be re-oriented to greater understanding of rural problems and how to work in these new strategies.

7. The nurses must learn to involve people in planning and decision making in order to help them to take more responsibiliy for their own health. Planning for the needs of the vulnerable groups, strengthening programmes for improved nutrition, sanitation, housing and better water supply should be done through the involvement of the community.

8. The Nursing students should be made conscious that they are part of the health care team to meet the health of the people.

9. More orientation and motivation should be given to the Nursing students for community health with the aim of preparing them for community health. During their student period they should be exposed to relevant and worthwhile programmes conducted in the primary health care centres.

10. Community health-oriented tutors should give training for the students in the training schools.

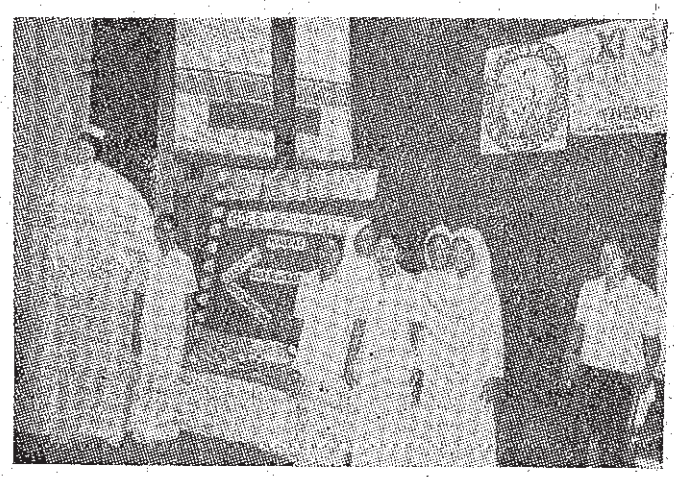
11. The professional organisations such as TNAI should organize workshops, conferences, refresher courses, etc., for the Nursing personnel and orient them in the care of the people with community.

Conclusion

In conclusion the practice of Nursing has traditionally been viewed as the science of cure in contrast to the science of care which is in the focus of medicine. Nursing concentrates on promotion of health, prevention of illness, restoration of health and alleviation of suffering. The WHO has accepted the slogan 'Health for All by the Year 2000 A.D.' as the basis of promoting the nation's health.

'Health for All' can be achieved not through the curative services alone, but through promotional and preventive health services, and it can be achieved through primary health care. For the achievement of 'Health for All by the Year 2000 A.D.' the shared responsibilities of the nurses and Nursing leaders are required. For this the country must review the role of nurses in the context of the Primary Health Care approach within the national health services and the overall development of the country.

The nurses should be encouraged to take full participation in all policy making and planning at all levels, local, district, state, regional, national and international. For this, nurses should be aware—of the current health policies, manpower requirements, administrative and personal policies of the government or the institution, the community organization



Participants of Symposium on Expanding Role of Nurses and Nursing Education

where they serve. The nurses should be utilized as teachers and supervisors in the primary Health Care activities. Suitably prepared nurses should be utilized in the Primary Health Care, research and as project planners or participants when planning, implementing and evaluating the primary Health Care programmes. The existing pattern of Nursing curriculum in all countries needs to be reviewed to integrate the concepts of Primary Health Care. Research should be an integral activity of Nursing in any area. Then we should say that nurses have a large role that is yet to be realized.

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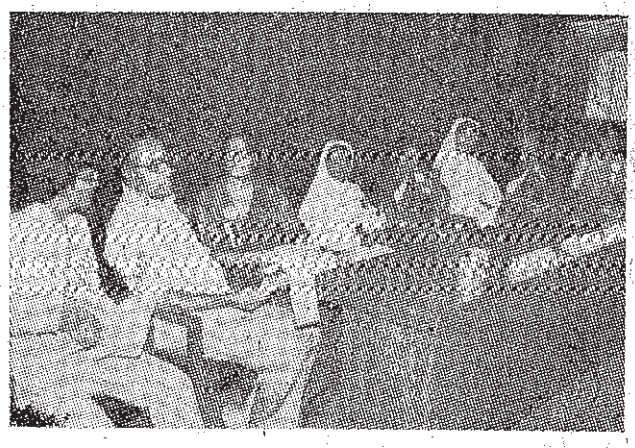
many from taking up their degree.

Now coming to the point of catering to the needs of the community, by producing better qualified nurses with a strong foundation and deeper knowledge we can also ensure better services. In addition the profession also will secure a better status in the society as the public will then give due recognition and status to the Nursing profession since the quality of nursing will definitely be improved.



Participants of Panel Discussion on 'Needs of Students Patients and Community'