

Nurses Speak Up for Better Health

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FLORENCE Nightingale, the Lady with the Lamp, has been the symbol of love, compassion and dedicated to the service of humanity.

It was Florence Nightingale, who had given the light of modern professional nursing. Her example, advice and the light that she has lit for us is traditionally being passed on from one generation to another.

We the nurses have to see that the light she has given to us keeps burning bright, that means we should keep on enhancing our knowledge in practice of Nursing, develop more and more skill to keep pace with advancing technology and to meet the needs of the Indian health care delivery system, as Nursing is a very important component of the health team.

The health care delivery system in India emphasizes on the policy of making minimum needs health services available in a package form to a large population in the shortest possible time alongwith a supporting strong structure for supervision and training.

Quantitative and qualitative aspects of Nursing manpower must be taken into account to meet the basic health care needs of the population.

Expansion of nurse training programme must keep pace with the growing needs for better Nursing care at peripheral, intermediate and central levels. This would take care of the quantitative aspect.

For improving the qualitative aspects of existing nurse manpower, leadership of a high order would be required in every health sector. The strengthening of higher education in Nursing with appropriate opportunities for advancement in service needs equal emphasis if not more to counteract the frustration, stagnation and neglect in this key component of public health and hospital Nursing services.

Educational Role of Nursing

Health centres must take roots in the villages. Village participation in the health care delivery system is imperative and long overdue. They must form a part of the health care system, to train these Village Health Workers or Primary Health Workers or Family Health Workers. The nurse must be held responsible depending on the socio-economic, cultural and educational background of the villager.

The community nurse has to select the Health Worker. The Auxiliary Nurse Midwife, who is less qualified than the Community Nurse also needs supervision and guidance to do her job effectively. The

Community Nurse is responsible for education of Nursing personnel, the indigenous and formal, and for health/education to the public.

Curriculum like learning should be dynamic process that is related to the needs of learners and of the society. Curriculum theory demands that the process of planning be continuous, dynamic and never ending if it is to serve best the needs of individual students, educational institutions and the society to which both are ultimately accountable.

Nurse educators have to be alert in keeping the curriculum preparing nurse's dynamics. The educational system will need to be reorganized so that learning starts in community, a process that will help students to understand the working of the community life, the nature of social structures and the contributions of each to individual family and community functions.

A great many leaders are needed to prepare the primary health workers, ANMs, community health nurses, teacher trainees, also, speciality nurses and nurse researchers at different educational levels of the Nursing profession.

There is an urgent need for flexibility for the Nursing education system. Continuing Education and Research in Nursing are gaining momentum in India. The nurse has to play an important role in using these mechanisms to lay the foundation for future Nursing practice.

Administrative and Advisory Role of Nursing

Nursing is a conscious practice of human relationship. There is the established health team of doctor, nurse, patient/family/community.

Nurses have to play the role in policy making and planning. At every level of administration, be it the sub-centre level or a ward level, the nurse administrator needs to have factual data on the outcome of Nursing Services as a basis for improving the level of health in the community as it relates to man, material or money.

I am happy to say that in other countries nurses are involved in planning and policy making. No meeting is held without a nurse administrator. In building committee, nurse planner is a must. It is recommended that in India also nurses must be involved in planning and policy making.

We do have a great number of nurses who are specialised in super specialities but it is sad that they switch on to administrative jobs leaving clinical field in which they have specialised because there are no incentives or chances of promotion in the clinical field. We

The author is Nursing Superintendent, LNJP Hospital, New Delhi. This piece is based on her address on the occasion of Capping and Lamp Lighting ceremony on May 12, 1984.

should put up to the Government that positions of nurse clinicians or supervisory jobs may be created and they should be paid equivalent to administrators so that their expertise is utilized for the patient's care.

Gone are the days when nurses were practising Nursing without adequate educational background and professional knowledge.

Today, Nursing is practised on scientific principles. Nurses are exposed to all the sciences so that they can give their best by using modern techniques of Nursing. Nurses are sent for higher studies within the country and outside the country. More colleges are coming up for degree programmes and the number of Schools for Nursing is increasing.

But we should not be satisfied with the present preparation and our goal must be very high and we must change with the time.

Nursing research needs to be encouraged. Better preparation of greater number at all levels of Nursing personnel is needed.

As a Nursing administrator, I find the trained nurses are going away from bedside Nursing. In case the Nursing leaders feel that the trained skilled nurses should be doing more technical and sophisticated Nursing procedures, we have to think aloud whether we should prepare another category, who can be best

suited for bedside Nursing care like practical nurses or nurse's aides, etc.

We can proudly say that nurses speak up for better health as they are better prepared for providing health care to the community. They are aware of their roles and its importance.

Many nurses are going abroad and the government has to think and provide attractive facilities to retain them.

T.N.A.I. has taken up a challenge during this Nurses' Week celebration by starting a refresher course scheme for various groups of nurses in India.

Let us take a pledge on this auspicious day that we nurses remain committed for serving the suffering humanity and would bear the maximum load in preventive and promotive health aspects of the community and society.

I am glad to say that R.A.K. College is playing a very important role in training nurses for leadership jobs, i.e., Nursing Educators, Nursing Administrators. The Section for Continuing Education organizes 4-8 workshops in a year for all categories of people under the expert guidance of Miss Hashmath Huque which is a great contribution.

I, therefore, recommend that all institutions should set up a continuing education cell or department for the growth and development of their staff.

NURSES SPEAK UP FOR BETTER HEALTH-II

A 'Wholistic' Approach

Dr. R.S. SEATON

THIS title could mean that nurses *do* speak up for better health. I can assure you that some do. The nurse in charge of our surgical ward claims that she told a young boy admitted for intestinal obstruction from ascaris infestation how to prevent a recurrence of the same problem.

This title could also mean that nurses *should* speak up for better health.

Why should they?

(1) If they don't, they send patients back to the same possibility of worms, dysentery and malnutrition that they encountered before. One mission doctor found that 85% of the children admitted to his hospital in severe dehydration and who were well when discharged had died in the subsequent five years.

(2) 1.5 million children die unnecessarily of dysentery in India each year.

(3) India appears to have the third lowest female-to-male ratio of all nations simply because of the cultural, socio-economic position of women.

(4) Only 20% of mothers in India have either a trained nurse or midwife present at their delivery time, so the maternal mortality rate is one of the highest. The rural to urban population ratio is 80:20, but nurses' ratio 20:80.

How should nurses speak up for better health?

(1) By teaching patients about cleanliness, vis-a-vis dirty fingers, food, flies, faeces, and foul water

(2) By motivating changes in patients' habits so

that they don't return to the kind of life they lived before. This may be one of our most difficult tasks, as evidenced by the carelessness of nurses and doctors about closing screen doors to operating rooms or shutting off needlessly burning lights and running taps in spite of repeated requests that they do so.

(3) By being where nurses are most needed, i.e., in India (not in Arabia and the more developed countries) in rural areas where the maximum number of people have the minimum in health facilities; in U.P. and other states where the general and infant mortality rates are higher than elsewhere.

(4) By reaching out with health education by extension methods into our surrounding communities, even our own neighbourhood where the streets are used as latrines in both the morning and evening.

(5) By changing our social attitudes and moral life in a society that has found it possible to selectively abort unwanted baby girls, and where, out of 800 million people, 20 million have sexually transmitted diseases and only 3.5% of these have been adequately treated in any one year.

It is clear therefore that better health requires a 'wholistic' approach so that all people may be able to have total physical, mental, social and moral or spiritual wellbeing.

So nurses, speak up for better total health. But match your words with your deeds.

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