The Quest for Autonomy

Mrs. SUNANDA S. ROY CHOWDHURY

PROFESSION and autonomy are two sides of the same coin. Professions are occupational groups linked with institutions of intellectual and enlightened wisdom with a component of selfless service to the society. Autonomy is the self-righteousness for self determination and self-governance—a core component of any profession.

Autonomy is an integral part of professional heritage. It is the very fabric of a profession. Autonomy helps a profession to establish, maintain and promote a distinctive image in a society. By virtue of its autonomous status a profession enjoys power and authority and attains a respectful status in society.

Autonomy is the inspiration behind a professional force to brave new ventures. It offers the members of a profession to inculcate a sense of self confidence, self-dignity, self-reliance and self-respect. Autonomy imbibes amongst the professionals a mood of self-determination to display dynamism in all dimensions and grow to their full heights. Behind intelligent, creative, compassionate manpower it is the professional autonomy which plays a crucial role.

Autonomy safeguards the values of a profession from external influences and interference. It is the stimulation for members of a profession to explore the full potentials by pursueing excellence in each endeavours in their noble mission of service to society.

National Health Scenario

In the national health scenario, equal to other health disciplines, nursing too is a powerful professional force. The profession is privileged to be called "noble". But the unpalatable truth is that nursing is a profession without autonomy. Autonomy in each dimension of nursing exists today in obscurity. Though nursing is a profession of paramount importance within the national health delivery system, yet it has been deliberately deprived of an autonomous status.

There have been parallel growth of many health disciplines. Medicine out of these, has emerged as the most dominant and unchallenged professional force and has secured a leading role, prescribing dictating and shaping the course of events in nursing and thus curbing its own power by every inch. A raw deal has been doled out to nursing in the process, curtailing its authority to self righteousness. The post-Nightingale epoch of the professional growth has faltered. The harshest truth is that nursing today presents itself as a professional career of an illusory choice.

Within the administrative framework of the national health organisation, the status of nursing is obviously a source of embarrassment. There lie disorganisation and chaos in every aspect of nursing. Though nursing has a major role in executing health policies, it has very insignificant role in formulation of policies and strategies in three major professional areas-nursing administration nursing education and nursing services.

An Unchanged Situation

Though there has been enviable advancement in all dimensions of nursing, it is surprising to note that this situation remains unchanged and also unchallenged yet. There has been no awakening amongst the senior nurses to question the validity of these malpractises. The nurses occupying the administrative positions seem to be content to remain merely a deputy or assistant to the chief-policy-maker, who is always a medical-boss. Thus the policies for nursing made by non-nurses remain deficient and defective. Within this repulsive atmosphere, nurse-administrators are trained to function as competent robots and carry out the faulty policies with the prescribed means within the restricted fields.

A great deal has happened in advancements of nursing education too. But this tragic situation still exists in all nursing institutions. The appreciable progress of academic process in nursing has not been able to change its fate. Nursing long ago, left its status of vocation and climbed the steps of academic ladder to become a strong educational force. Nurse educators with their proficiency and competence deserve comparisons with educators of other disciplines. But the nurse-educators have restricted roles in exercising their knowledge and competence, as the major portion of the nursing curriculum is covered by the medical teachers. It is shameful to note that this pattern exists from the elementary courses to specialised courses of nursing. The irony of this situatian is that this pattern has been prescribed by the nurses themselves. The system of evaluation in nursing is also not entirely free from such endeavours. It is not a rare scene where medical teachers act as examiners and thus evaluators at all levels of nursing education.

In the prevailing situation of various areas of nursing services, the condition is even more critical. Whether it is within the hospital or community, nurses everywhere work as subordinates to their medical chief. In a hospital, where nurses function as the major task-force, the leadership positions are deliberately kept away from them. The chief nursing positions in a hospital or in a community set up are always on an inferior rank to that of the medical authorities.

This system has remained same over the decades and still extant. This has led the profession to a path of deterioration and into a state of decay. Needless to say that this has posed a serious threat to the very existence of nursing profession. This gradual decline in professional status has caused specific concern

amongst the younger generation of nurses. What exactly has gone wrong? What are the lapses? Where lies the answer?

The critical analysis of the origin and evolution of nursing unfolds some clues to today's status of nursing profession.

Early nursing in the world did not assume an autonomous stance. This was probably because most nurses were women and female-status was low. The decision making areas for nurses were narrow. Nurses' functions were virtually trivialised and ignored. Nursing had originated under the care of medical profession and thus the growth was automatically moulded towards a subordinate position

Guardianship of Nursing?

As nursing took birth and grew under the protective and dominative hood of medical authorities, medical profession adopted the legal guardianship of nursing. Medicine played a definite and concrete role in the modern Nursing—there is no doubt about it. The nurses gratefully acknowledge the debts towards medical profession and recall with gratitude, the guidance, support and co-operation the profession received throughout. But it is an undeniable fact that this godfatherly attitude of medical profession has caused irreversible damage in the free growth of nursing as an independent profession. Nursing has not learnt to stand on its own feet. Nurses till today look forward to the medical-authorities for guidance and direction. Nursing professionals after such protective phase lack the courage to meet on their own, today's demands and challenges. The lack of autonomy has impeded the progress of the profession making the professional activities sluggish and stagnant. Thus a low opinion on nursing has been imposed gradually.

The grip over the nursing profession was tightened over the years under the pretext of protection. Nursing has been compelled to remain within the medical clutches, which altered the course of nursing towards an undesirable end. Thus over the years—nursing degraded from a noble profession to a parasitic occupation. Nurses seldom got an opportu nity to give vent to their grievances. Any attempt by nurses to attain autonomy was prematurely and instantly aborted. The dragnet the medical authority has spread has expanded and nurses were powerless to escape it.

On the other side, a lack of eagerness and initiative on the part of nurses to attain autonomy, is clearly evident. Majority of the nurses do not seem to resist actively their subordinate role. It will be an acid test to analyse the personality traits of many a nurse who can be pinned responsible for keeping themselves engaged in atrocious practices of assisting medical authorities to overpower the efforts of nurses to gain autonomy. These nurses possess inadequate academic preparation and are of little ability or competence and exercising their unflinching loyalty to the medical authorities. have smoothly made their ascent to the professional superior roles. This has been possible because even till today the medical profession has a say at all levels of selection of nurses.

Nurses have been angry, anguished, disgusted and —dismayed at this unfortunate, turn of tale. Irritation was generated, the ego was wounded, frustation was borne out. But nurses are left with no option than only to observe this sorry state of affairs.

Precious Time Lost

Nurses have lost precious time waiting that someday autonomy would come—but it did not. History reminds us that autonomy, independence, freedom do not come, they are to be attained. The power is something which everybody wishes to exercise over others. It is the human nature and medical people are no different. Over the years this issue has gained importance and come to the forefront. There has been gradual growing of discontent amongst the younger nurses who are disillusioned by their own leaders and also medical counter-parts. The professional reform is the main task today before the new generation of nurses. They are to resume the stir with renewed vigour to push it forward towards the path of autonomy. There must be no turning back.

Nurses with a renewed pledge and a fresh spirit are to start anew the companign. The demand is to be placed before the medical authorities—"Hands off nurses. Let them be their own rulers". All nurses' voices should echo the same feeling. This demand is to be persisted till the power of autonomy is attained. The long cherished autonomy, if it can be achieved, will be a turning point for modern nursing.

By making efforts to make themselves free from medical influence, nurses do not wish to be at war with their medical colleagues. Neither should it bring any split between the two professions. This will probably be the end of a superior and subordinate relationship and a cordial kingship on mutual understanding and respect will begin.

Importance of Preserving Autonomy

Only achieving autonomy will not solve the problems of nursing. Sincere and earnest efforts should be made to preserve autonomy. Nursing is to be regarded as an essential and integral component of national health programme, not only in talks, but in deeds. Nurses are to be given opportunity to participate, not only in records, but in reality, as members of interdisciplinary team, in planning, programming, implementing and evaluating health and nursing services. For this purpose leaders are to be chosen from better brains, better intelligence and better preparations. Nurses are to assume leadership in all areas of functioning concerning nursing administration, nursing education and nursing services within the range of health service programmes of the country.

Nursing as a full fledged profession must be able to enjoy absolute autonomy. No other discipline should control the profession. Nurses must have latitude in making judgements in all areas of nursing,

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within the scope of progessional practices. If other professions keep controlling nursing, it will never be able to develop its full potentials as profession. If the voices of other professions over-ride that of nursing the tremendous contribution by nurses within the scope of health services will be lost.

It requires diffusion of conventional policies in nursing to strengthen and expand the professional sphere. There is a need for reevaluation of established system. A rational system in nursing is to be developed with seriousness of purpose and larger perspective. For reaching out towards new realities a comprehensive model is to be set with new professional objectives and values. Fresh formulas and strategies are to be developed. The new system must be able to safe-guard the professional interests.

The strength of any profession lies in the quality of its manpower which is directly proportional to the quality of education. The profession should provide an atmosphere conducive for implementing nursing education as a vital force for adopting new skills and innovations The leadership in nursing should take a fresh look at itself if it is serious about ushering a new era in nursing. The leadership must possess ability to overcome new challenges. The nurse leaders are to prepare themselves to shouder greater responsibilities. Nursing leaders are not to function in isolation. Instead they should work hands in hands with their professional colleagues. The malpractioners in the profession are to be suitably rehabilitated. A professional awareness is to be created to liberate its members from the captivity of the tradition-bound habits. The profession has to reshape and remodel its structure and reset its standards of quality services, and develop all round potential. A pride for professional value is to be infused within the nurses. Nursing profession must make conscious and serious attempts to look for new channels and avenues to improve the quality of nursing service and achieve consistency in its performance. With a zealous and commendable social dealing nurses are to carve for themselves a prestigious niche not only within the other health disciplines but also in the society.

Obituary

Mrs. Sosamma Yunus Quraishi, (nee Ipe) a very senior member of the Nursing fraternity and a Life

Mrs. S.Y. Quraishi

Member of the Trained Nurses' Association of India passed away peacefully on February 5, 1986, after a prolonged illness patiently borne.

Miss Ipe had her general training in Nursing in the K.E.M. Hospital, Bombay in 1936, and midwifery in 1938-39 in the Wadia Meternity Hospital, Bombay.

To add laurels, to a distinguished career at L.T.M.G. Hospital, Bombay, she entered the portals of School of Nursing Administration, Delhi in July 1947, in no less a company than that of Miss A. Cherian, a name that has carved out for itself a niche in the hall of fame of Indian Nursing profession and its fraternity.

Soon after her return from Delhi, Miss Ipe was to take charge of the Military Hospital housed in several barracks, spread over a vast area in Sion, almost at the outskirts of Bombay City.

In 1967, Miss Ipe was awarded W.H.O. Scholarship for study tour of U.S.A. to observe in-service education in Nursing as was imparted in several of its states. Back home after six months, she held several workshops on in-service education for the benefit of Nursing personnel of Municipal Corporation of Greater Bombay.

Miss Ipe continued as Matron for 25 years, for there were no higher avenues open and retired on December 12, 1973, after a lifetime (1933 to 1973) of dedicated selfless service.

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Ms. Kepehuu (Peno), Lady Health Visitor, attached to Jalukie I.C.D.S. Kohima district, Nagaland, met her death in a bus accident on May 6 last, while she was on duty. She left behind her grieving husband, one son and two daughters.

Ms. Kepehuu completed her ANM course from Naga Hospital, Kohima, in 1968, and worked as an ANM form 1968. she completed promotees' course and was promoted as Lady Health Visitor in 1981.

She was a very active member of the T.N.A.I. and was one of the best nurses in Nagaland. May her soul rest in peace.