REHABILITATION

By Miss Hillary Parmar

Everyone knows something about rehabilitation. I like to write on this topic from my field experience. I was lucky to observe the physical therapy department and school (though not in session) of a large government hospital. It was started in 1955 in the X-ray department with one massage therapist. One physiotherapist was added in 1961. There was a growing awareness of the need for physiotherapy treatment for patients and in 1969 the school was started with ten candidates.

The school admits candidates who have passed pre-medical. This school is affiliated with a university. At present, there are six therapists working under a senior physiotherapist.

What is Rehabilitation?

Rehabilitation is concerned not with physical activity alone. It is said that the entire process of rehabilitation is 'nine parts mental and one part physical.' One of the most important aspects of giving continuing care to a patient with a disability is the nurse's own attitude and expectations. Helping the patient and his family to themselves is an integral part of nursing care. Rehabilitation is the process by which a person is helped to activate all his resources, both physical and mental, towards reaching a goal. That goal is a way of life that is as nearly normal as possible, and an acceptance of both limitations and remaining abilities. It is a slow process in most instances, and the patience required of the nurse is not easily acquired. She must be able to understand her scientific and nursing background the patient's condition and the course of rehabilitation for that particular patient. She must accept the handicapped individual as a person.

Activities of Daily Living

Let us think for a moment how some nice and beautiful artificial flowers are made by the handicapped. For a normal person it may be easy. For a handicapped person it may be a difficult task to comb the hair, take food or easily move the elbow, wrist and fingers. The surgeon may ask the patient to raise his hand, to open his fist, to hold his hands straight, but it is for the nurses to see that the patient can use these motions in "A.D.L." (Activities of Daily Living). For this we need minute observation, good understanding and experience, with motivation and interest.

Adaptation

Let us see the case of hemiplegia or fracture spine. They are given prosthetic shoes, by which the patient can learn to walk and to stand. It is important for us to know all types of joints. The surgeon goes away after the operation but the nurse remains with the patient. Social worker also has a role to help with family and social problems, associated with the illness. The physiotherapist is also needed at times. We must understand the patient's need.

In physiotherapy we use nature as an agent. We use natural resources to facilitate the movement and for easy approach. We use physical factors such as water, heat and air. We give our patients hot baths, wax therapy, diathermy etc.

Special Services

In occupational therapy, disabled persons require co-operation between the professional and auxiliary services as well as between community agencies. The disabled person requires a rehabilitation plan that takes into account all the available services and benefits that are suited to his specific needs. There are many facilities for disabled persons such as sheltered work-shops, adult education programs, special training facilities, services of psychiatrist, physical therapist, occupational therapist, or speech therapist. These special services, when available should be made known to the patient and family.

Role of Public Health Nurse

According to Ethel L. Kallins (her book "Textbook of Public Health Nursing"), the Public Health Nurse plays an important role in rehabilitation on the community level. Her responsibilities generally consist of the following:

1. Liaison between rehabilitation personnel, the community, the patient and the physician in charge of the patient. "Apang Manav Mandal", Ahmedabad, is an example of a cooperative venture of the Government and the citizens.
2. Education of the family and assessing the suitability of the home environment for the discharged patient.
3. Bedside nursing care in the home, if needed.
4. Additional services such as physical, occupational, and recreational therapy brought to the home-bound patient.
5. Instruction in rehabilitation techniques for nursing home personnel.
6. Referral to local agencies of vocational rehabilitation.
7. Provision of some rehabilitation services on outpatient basis.
8. Instruction on home care of the disabled person to responsible family members, home makers or volunteers.

Health Team

Nurses and Physiotherapists are both members of the health team. Each has a role as they complement each other's skills. In fact nurses should learn some of the skills and techniques of physiotherapists which can easily be done on the ward in order to assist in rehabilitation. The nurse's patience in stimulating self help is the key to rehabilitation of countless disheartened individuals. Nurses should have the ability to teach, encourage and "listen" patiently and then await the results even though changes may come slowly.

A nurse who understands the prevention and treatment of handicapping conditions and applies her nursing knowledge and skills with understanding and sympathy cannot fail to help rehabilitate a good percentage of her patients.

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