Interpersonal Relations

By

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INTERPERSONAL relations refer to the ways a human being relates with other human beings. They are primarily found among the members of a a social group, such as the family, the peer group, the school, the office and so forth. Interpersonal relations are the subject of study of different branches of the Social Sciences, such as Anthropology, Sociology, Social Psychology and Psychiatry. In recent years the new branches have emerged in this field, that is, Group Dynamics and Sociometry.

How do interpersonal relations develop ?

Interpersonal relations are not hereditary; they are learned. The learning process is a very lengthy one and in essence it consists in that the child comes to realize that he is not alone in the world and that, if he has to live happily with others, he must give up his ego-centred ways of behaviour and adopt attitudes of respect and understanding of, and co-operation with, other people.

The child learns to relate to other human beings first in the family, that is, mummy, daddy, brothers and sisters. The child learns to relate to non-family members by transferring to them the type of relations he has established with his family members.

As usually the child first relates with his mother and father, the parent-child relations are basic to the kind of human relations the child will develop. The child's first experience in having his wishes thwarted is in the areas of feeding and toilet training. Mothers differ in their ways from very permissive to very strict. The effects of mother's attitudes on the child's personality development are many and varied. Summarizing various studies done in this area, I shall mention some kinds of parental attitudes and their effects on the child.

Parental attitudes

Parental *rejection* produces in the child aggressiveness and feelings of insecurity; *overprotection*, anxiety, over-submissiveness and insecurity feelings; *permissiveness*, self-confidence and aggressiveness; *disharmony* among parents jealousy aggressiveness and delinquency. A dozen surveys, summarized by Louttit in 1947, agree that nearly 50 per cent. of juvenile delinquents came from broken homes.

The best way of creating satisfactory interpersonal relations in children is the golden mean between permissiveness and rigidity. Recent evidence suggests that the effects of institutionalization upon the formation of interpersonal relations in the child are unfortunate.

The School

Next to the family, perhaps the most powerful factor influencing the development of interpersonal relations in the child is the school. When the youngster enters the K.G. he has already some interpersonal relations in the family, such as to play co-operatively and to recognize to some extent the rights of others. But then he is faced with the difficult task of learning to give up his privileged position of being the centre of attention of the group, and to engage in activities in which he may not be interested. It is then that the child painfully learns that what really matters is not so much his own satisfaction as the good of the group.

In India

In India caste, community, and majority or minority consciousness play an important part in the development of interpersonal relations. Thus, particularly in villages, the Harijan child is taught to respect the high caste people, to be submissive and to develop inferiority feelings. The Brahmin child on the other hand learns to be dominant and self-secure. Members of minority communities may become over conscious of the fact that in a competitive society, rife with politics and nepotism, their future prospects are not promising.

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Mechanisms

After we have considered the development of interpersonal relations, we pass on to explain some of the mechanisms involved in their process. *Conditioning* plays a part. Thus mummy smiles to friends and the child smiles to mummy and her friends first and then to friends without mummy. *Specialization* : as the child grows, he relates with more and more persons in his environment. He learns to foster those interpersonal relations which give him greatest satisfaction and to drop others that prove unsatisfactory. *Habit formation* : as some relations prove rewarding, they are strengthened and become habits.

Other mechanisms at work in the process of developing interpersonal relations are suggestibility, imitation, sympathy and projection. I shall not dwell on those here but rather pass on to the field of interpersonal relations in which the matron lives.

Matron and Nurses

When a Matron is appointed to a Hospital, she brings with her a host of personal factors which have to be considered if satisfactory interpersonal relations are to be established. She may be an extro-

vert or introvert. She brings with her, her background, her philosophy of life, her anxieties, prejudices, (Caste, religion, language) her frustrations, in fine her personal problems. The interaction of all these factors within her will determine her personal relations with the staff and patients.

The Matron has to establish relations at different levels, i.e., with the Superintendent of the Hospital, Hon. Doctors, Resident Doctors, Sisters, Staff Nurses, Nurses, Menial staff, patient and visitors. It is a very complex field indeed. In this paper, I shall concentrate on the Matron's relations with Nurses only.

Nurses

Let us now describe the nurses. The student nurses are generally young girls, mostly between 16 and 22 years. They are fresh from school and away from home in a somewhat foreign place. They are in need of parental affection warmth and dependence.

Sexually, they are fully developed and at the peak of their natural attractiveness. Most of them are short of money. Naturally, marriage looms large in the horizon. Their desire to please leads them often into trouble.

Psychological principles

After describing both matrons and nurses, I shall give some psychological principles which will help to establish satisfactory human relations.

The matron should be aware of her strengths and weakness. If she is self-accepting, she will also be accepting of others ; but if she is not, then it will be difficult for her to accept her nurses as they are, and to allow them to be themselves. She should remember that nurses differ one from another, and that each one is unique. She cannot deal in the same manner with all. It would help her to know their home background. Do they come from happy homes, or broken homes ? Are their parents authoritarian or overprotective or rejecting ?

Many student nurses lack self-confidence. They need reassurance and encouragement. Give them credit when they deserve it and compliment them on a job well done. Look for the good points in each. Make them feel that you trust them ; that they can do well as nurses. Some nurses are very gifted. Stimulate them to use their potential fully. You may recommend them for scholarships and training abroad.

The great problem is to strike a happy balance between efficiency and strictness. The solution lies in treating the nurses as responsible persons and in trusting them. You may address them on these topics and explain these ideas. This will create an atmosphere of trust and responsibility.

Respect their rights : I shall relate here a historical incident to clarify this point. In a certain hospital, the Matron wanted to help her brother to secure a job. She did not hesitate to awaken a Staff Nurse at 10 a.m. who had spent the night on duty and had gone to bed shortly before, and to ask her to accompany him to meet someone. As this first interview was not successful, the matron awakened the same Staff Nurse on the following day for the same purpose. This abuse of authority for personal advantages is to be regretted. It creates a lot of ill-feelings and quite understandibly so.

Please them in little things, for example, an outing they want very badly on a particular day.

Be fair to all : do not act on reports. Verify the reports first and give the person concerned a chance to explain her viewpoint. See that their food arrangements are satisfactory.

Nurses are young people growing gradually into adults. They have to learn many things and they learn them like all learners by making mistakes.

The Matron who grows in self understanding and understanding of her Nurses, who focuses her attention on their good points and helps them sympathetically to develop them, will more easily communicate with them as person to person, and will establish very satisfactory interpersonal relations.

Appointment Of Miss T.K. Adranvala

Miss T. K. Adranvala, Nursing Adviser from 1948 to 1966 to the Directorate General of Health Services, Ministry of Health, Government of India, New Delhi, has been appointed by the World Health Organization (WHO) as Nurse Adviser to the WHO Nursing Education Project in Kathmandu, Nepal. The aim of this project is to establish a Division of Nursing in the Directorate of the Nepal Health Services to co-ordinate nursing activities in the country ; to consult on the operation of a basic nursing school to prepare qualified nurse midwives for health services ; to upgrade nursing services in Bir Hospital in Kathmandu, and to improve the clinical field for student nurses.

Education as well as experience qualify Miss Adranvala for this assignment. Holder of diplomas in Nursing Education from the Royal College of Nursing in London and in Nursing for Hospital Administration from the University of London, Miss Adranvala was Matron of the J.J. Group of Hospitals in Bombay from 1939 to 1946, before she held the post of Nursing Adviser in the Indian Ministry of Health. Miss Adranvala is an ex-vice-president of the International Council of Nurses and a member of the WHO Expert Committee on Nursing.

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