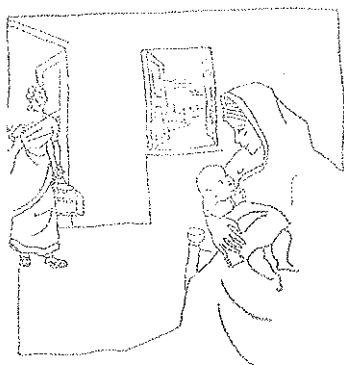




Training of Nursing Personnel for Family Planning Work

By

S. ZACHARIAH

All India Institute of Hygiene & Public Health, Calcutta

(Paper presented at the Seminar held at the time of TNAI Conference in Bhopal, October, 1966)

EVERY profession takes pride in specifying standards and limits of training so as to provide the necessary knowledge and skill to practise. It will not be wrong to state that the nursing profession throughout the world, and in this country, has been ever vigilant in scrutinising and modifying the curriculum of the nursing courses to keep pace with the increasing demands made on the nurse—an important member of the health team. Today, India is facing an emergency in terms of her population growth. The Nurse is called upon to take a vital part in the national programme planned to face this crisis. For her, to cope with this responsibility, confidence is to be provided in terms of knowledge and skill. This paper discusses briefly how various categories of nursing personnel can be trained to accept fully the family planning responsibility.

Need for training nursing personnel for Family Planning work

The nursing curriculum includes subjects like reproductive physiology, sociology, psychology and other basic sciences which are essential for teaching family planning. However, additional coverage in family planning becomes imperative in the present context. It is hoped that this would achieve the following :

- (a) create an awareness among the students of nursing about the urgent need of family planning as a national programme.
- (b) help the students to recognise

family planning responsibilities as an essential part of the professional role of nurses.

- (c) assist them in developing a correct and healthy attitude towards family planning as a family welfare programme.
- (d) equip them with scientific and up-to-date knowledge and skill in family planning to fulfil their role effectively in various fields of family planning work.

Type of Training

I. Basic Course

The nurse, health visitor and auxiliary nurse-midwife are categories of basic nursing personnel who need family planning training. It is vital that this be done from the basic training stage to give family planning the correct status it needs.

The Indian Nursing Council has recommended the integration of family planning into the above courses and most of the schools of nursing have already implemented this.

A suggested guide line of integrating family planning in various courses is given below :

(A) Certificate course in nursing and midwifery.

First Year Students—(a) Reproductive system—male and female. This can be incorporated with anatomy and physiology classes, (b) health and welfare of the individual, family, community and

country; factors influencing their promotion to the maximum and the factors hindering their promotion; population explosion and its effects, desirability of a small size family—all these can be taught as a part of personnel and community hygiene.

Second Year Students—(a) Family planning as a national programme—achievements, targets and various developmental plans—can be introduced along with the teaching of other national programmes such as malaria and small-pox eradication and control of tuberculosis etc. (b) communication skills, art of interviewing—can be taught along with psychology, health education and sociology, (c) resources available for family planning programme and the role of nurses in such a programme.

Third Year Students—(a) Methods and techniques used in family planning, advantages and disadvantages of different methods, complications and managements, (b) integration of family planning in public health nursing service for the total care of the family, (c) how to select suitable couples from the hospital wards, O.P.D. and clinic for family planning education, (d) the resources and supplies available. **Observation** of health centres and activities in family planning centres including insertion of IUCD, vasectomy and ligation of tubes. **Practical experience**—including (a) health education at all levels—all mothers in maternity wards, parents of children admitted in hospitals, eligible couples in O.P.D., chest clinic, V.D. clinics

and medical and surgical wards ;
(b) home visits and (c) clinic work.

(B) Degree Course in Nursing

Family planning should be integrated along with anatomy, physiology, sociology, psychology and other basic sciences, maternal and child health and other public health subjects throughout the training period. Adequate emphasis to family planning should be given during the third and fourth years and sufficient practical experience should be provided through field work. Role of the panchayat, various village workers, leaders and voluntary organisations and how to co-ordinate the efforts of all workers should be stressed.

(C) Health Visitors Course

As health visitors are very important members of the health team at the block level for implementation of MCH and family planning programme and in supervising the auxiliary nurse-midwives, all aspects of family planning should be stressed in detail. Sufficient amount of practical experience should be provided during their field work especially in the rural areas.

(D) Auxiliary Nurse-Midwives' Course.

Auxiliary nurse-midwives are considered to be the most important people for the mass family planning programme in the rural areas today. Hence all aspects of family planning should be taught in a simple way so that they will be able to understand their role in the family planning programme. Adequate amount of practical experience should be provided during their training period. The role of other health workers, voluntary organisations, village workers, leaders, depot holders etc. should also be explained to them.

II. Post-basic course, post-basic degree course and post-graduate course

Most of the students undergoing these courses will be required to train, supervise and provide consultation to the other category of nursing personnel in family planning. In addition they will be involved in evaluation of family

planning activities. To effectively play the above role, careful preparation is needed.

Some of the topics could be integrated with other subjects like vital statistics, education, sociology, psychology, maternal care, public health administration including national plans, community organisation, organisational set-up of family planning programme at state, district and primary health centre level etc. Syllabus should include family planning in detail with special reference to planning, administration, training and supervision of nursing personnel, duties of various categories of health and welfare personnel, in family planning programme, extension education programme, location of leaders, use of voluntary organisations, communication methods—mass communication and interpersonal communication methods. Co-ordination of efforts of all official and voluntary agencies, records, reports and evaluation. During the field work, they should be given experience in family planning work along with maternal and child health service, tuberculosis control work and other health services.

III. In Service training

Public health nurses, health visitors, midwives and auxiliary nurse-midwives etc. need to be oriented in family planning if they are to fill the roles expected of them in the national programme. Orientation may be in the form of : (a) intensive short course which could be arranged at the district headquarters or at a very well-equipped institution for a short period. As it is not possible to take away all the staff from their working places, small groups of nursing personnel can be given training at a time for about seven days. Such courses may be organised by one of the senior nursing personnel, public health nurse or health visitor in collaboration with medical officer, the district family planning officer, district extension education officer, block extension educators and other experts in family planning. (b) Continued education—in the form of seminars, group discussions, role play, demonstration and field visits should be conducted at the primary health centre or

at the district headquarters once a week. Such training could be arranged on Saturdays for about 2-3 hours before or after the weekly meeting. In any case, it is advisable to have at least one session per week to discuss the family planning programme, problems in day to day work, and their solutions, achievement, targets, etc. (c) Job orientation course—though family planning is to be an integrated service along with other public health services and all nursing personnel are concerned with it, the urgency of the programme has necessitated the appointment of additional staff who will pay major attention to family planning work. Job orientation of these personnel is the responsibility of District Family Planning Officers and standard curriculum for this purpose has been already worked out and circulated.

IV. Training of trainees

Sister Tutors—general, or midwifery tutors or public health tutors and nursing administrators whose duty is training, supervision, planning and evaluation also require a thorough and intensive short course. Such course should be conducted at the Regional Family Planning Centres for a week or ten days and could be in the form of lectures, seminars, group discussions and observation visits.

All those who are expected to participate in the teaching and supervision of family planning work must have adequate training so that they will be able to teach and supervise effectively.

The above mentioned training could be conducted with the existing facilities provided the institution has family planning trained teachers and a field to practise in addition to a hospital, health centres or family planning centres. All the available resources will have to be pooled for conducting all the above courses.

Hostel accommodation should be provided for the trainees.

Extra expenditure will be involved for T.A. and reasonable stipends for the trainees in addition to their usual pay and allowances.

Transport is an essential item for observation visits and field work.

Evaluation

Evaluation of training programme in terms of :

(a) coverage of training of nursing personnel—how many have been trained, and the categories of nursing personnel trained.

(b) quality of training—methods employed from students and from trainees.

(c) post-course evaluation to find out the retention of factual information by the trainees. It is advisable to test the level of student's awareness of factual information by conducting a short quiz. Group discussions, seminars, workshops and individual assignments in the hospital, in the clinic and in the field will provide ample opportunity to evaluate the students during the course. Criteria and suitable measurements for this purpose must be worked out.

Evaluation of a successful family planning training programme would result in :

(a) enhanced ability to screen out eligible couples—resulting in better attendance at clinics and off-take of materials.

(b) experience in interviewing and communication skills—results in better case holding, non-reversal of discussions on sterilisations and minimum removal of IUCD, minimum number of defaulters in using other methods.

(c) ability to recognise opportunities for family planning education as an integral part of health services.

(d) ability to maintain adequate, complete and up-to-date records.

Follow-up of the Trainees

Periodical follow-up of the trainees is an essential part of the programme. A simple questionnaire may be sent to the trainees based on the following :

1. application of the knowledge gained during the training.
2. facilities available and the utilisation of such facilities.
3. problems found in family planning work.
4. opinion of the trainees regarding the adequacy of the training to meet the needs.
5. suggestion for improvement and modification of the course.

REFERENCES

1. Director General of Health Services—Ministry of Health—Family Planning Programme Report for 1962-63.
2. Central Family Planning Institute...Manual for extension of work in family planning—rural programme.
3. Berelson and others—Family Planning and Population Progress 1965.
4. G.R. Amritmahal—Workshop on training of family planning personnel. Family Planning News, July 1966.

OBITUARY

With deep regret we announce the death of Miss Katherine MacLaggan, a Member of the ICN Council of National Representatives. At the time of her death on February 6, Dr. MacLaggan was Director, School of Nursing, University of New Brunswick, Fredericton and President of the Canadian Nurses Association. In this last capacity she was a member of the ICN Council of National Representative.

It was in July last year, at the 33rd biennial conference of the Canadian Nurses Association that she was elected President by acclamation. She was a graduate of the

Royal Victoria Hospital School of Nursing, Montreal. Later she studied at McGill University, Montreal where she obtained a B.N. degree, and at Columbia University, New York from which she held the degrees of M.A. in nursing education and Ed.D. She had held staff positions at the general duty level in the Royal Victoria Hospital, in industry and in the Public Health Nursing Service of the Department of Health of New Brunswick. She later became Assistant Director of Public Health Nursing at Teachers College, Fredericton. Her book, *Portrait of*

Nursing, A Plan for the Education of Nurses in the Province of New Brunswick, was published in 1965.

The greatest contribution she made to nursing in her own country and universally will remain, but with her death the nursing profession has sustained a profound loss.

Dr. MacLaggan, undaunted by illness, led a full and active life with a fortitude that was the admiration of all who knew her.

We offer the members of the Canadian Nurses Association our sincere sympathy.

(With ack. to ICN)