

Integration of Psychiatric Nursing in the Basic Nursing Curriculum—Part I

By

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TODAY we are presenting a Seminar on the integration of Psychiatric Nursing into the basic curriculum. It is indeed a great privilege that we are given this opportunity to present such an important subject as this.

Just now you have witnessed the role play on some of the nursing situations where a psychiatrically oriented sister was able to help in solving the problems. Let us now consider how the psychiatric principles were practised even many centuries ago and how and why these principles could be reintroduced into the modern nursing practice.

India is one of the pioneer countries in the world which started nursing as a profession when many of the civilized countries of today were still wrapped up in obscurity. The renowned ancient physicians in the field of Ayurveda like Charaka and Sushruta included nursing attendants in their medical team as one of the four basic factors of treatment. Charaka has put down the desirable qualities of a nurse and also the guiding principles for a successful nurse-patient relationship.

The role of the nurse in the field of medicine is changing rapidly as a direct result of recent advancement in medical science. The current trend is linking up of psychiatry with general medicine and psychiatric nursing with general nursing. In the past, psychiatric nursing has taken its lead from general nursing, but it seems most likely that in the future, general hospital nursing is inclined to be strongly influenced by our experience in the psychiatric sphere. With the increasing recognition of emotional factors in all types of illness, it is becoming very important for

We have pleasure to publish the three papers on Integration of Psychiatric Nursing into Basic Nursing Curriculum in series presented at the time of the Second Biennial Conference of the TNAI, held in Bangalore in October 1964, in the form of Seminar-cum-Role Play sponsored by the TNAI Education Section. The participants were Mrs. A. S. Pillai, Lecturer and Head of the Department of Psychiatric Nursing, All-India Institute of Mental Health, Bangalore (Chairman), Mr. T. Basappa, Tutor in Psychiatric Nursing, All-India Institute of Mental Health, Bangalore and Mr. C. P. B. Kurup, Nursing Tutor, Bowring Hospital, Bangalore, (Members).

The Seminar was preceded by a role-play enacted by the psychiatric nursing students of the All-India Institute of Mental Health, Bangalore. The role play displayed three nursing situations which are common in General Hospitals. It portrayed that the patient is a person with worth and dignity and not just a bed number or a diagnostic entity; that emotional upsets cause changes in biochemical balance in the body; and that interpersonal tensions between the nurse, doctor and patient, retard the patient's recovery.

Mrs. A. S. Pillai, Chairman, introduced the speakers and the subject matter on which they spoke.

We believe these papers will be of much interest to those members who were not fortunate to attend the Conference in Bangalore.

—EDITOR

nurses to have adequate knowledge of the normal personality development and a clear understanding of abnormal reactions as a prerequisite for effective functioning in any branch of nursing.

For the last few years the nursing leaders all over the world have come to realise the importance of introducing in nursing education the concept of the patient as an integrated unit, as a whole person, his body, his mind and his emotions in unison, reacting to his illness or his health. By the end of the Fourth Five Year Plan, the Government of India and the Indian Nursing Council propose to take various measures to integrate psychiatric nursing in the basic nursing curriculum throughout our country.

Broadly speaking the psychosomatic view point of illness and the nurse-patient relationship are the

most important factors which created the need for this integration. In any type of physical illness there is an accompanying emotional element. In these days of speciality, a patient goes through various specialists who examine, investigate and treat a special system or organ. But we as nurses cannot treat just an organ or nurse a disease. In the case of his physical illness we have to consider the patient as an integrated unit—an individual—rather than in terms of diseased organs.

The nurses' knowledge in psychiatry, psychology and emotional problems will enable them to allay the fears and anxieties in patients, waiting for surgery, cases of amputation of breasts, limbs and severe disfiguration due to accidents, burns or other mishaps. Chronic illnesses like tuberculosis and leprosy which

are all too common in India are also associated with concomitant psychological problems. Children, adolescents and old people need special understanding, taking into consideration their emotional needs along with the normal physiological changes. Patients suffering from incurable conditions like cancer and mothers of still-born or imperfect babies, unmarried mothers, all need sympathetic understanding and handling. Newly admitted patients find it often difficult to adjust to hospital life because of separation from their dear and near ones, fear of hospitals, sight of suffering, pain and death. Reassurance by the nurse is very important in these instances. In all aspects of nursing practice, principles of psychiatric nursing are followed in one form or other. It consists of an application of concepts and techniques in order to understand and use more beneficially the relationship of nurse with the patient. This is borne out by the above examples.

Though this is an era of integration, from careful study we can see that this concept is not new to us. Hippocrates, the father of modern medicine said: "to cure the body it is necessary to have the knowledge of the whole". Plato said in one of

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Members of the Trained Nurses Association of India will learn with deep sorrow the sad news of the death of Miss Margaretta Craig at Ludhiana on December 25, 1964. We extend our deep sympathies to her relatives, friends and the nursing staff of the C.M.C. Hospital, Ludhiana.—Editor.

his dialogues: "this is the reason why the cure of many diseases is unknown to physicians of Hallas because they are ignorant of the whole, which ought to be studied also for the part can never be made well unless the whole is well". Florence Nightingale, the founder of modern Nursing knew this concept well. Good nursing care meant nurse's ability to recognise and react to the physical, social, psychological and spiritual needs of the patients. She mentioned in her notes on 'Nursing': "Apprehensions, uncertainty, waiting, expectation, fear or surprise do a patient more harm than any exertion. Remember that he is face to face with his enemy all the time, internally wrestling and having a long imaginary conversation with him. Rid him this adversary quickly is the

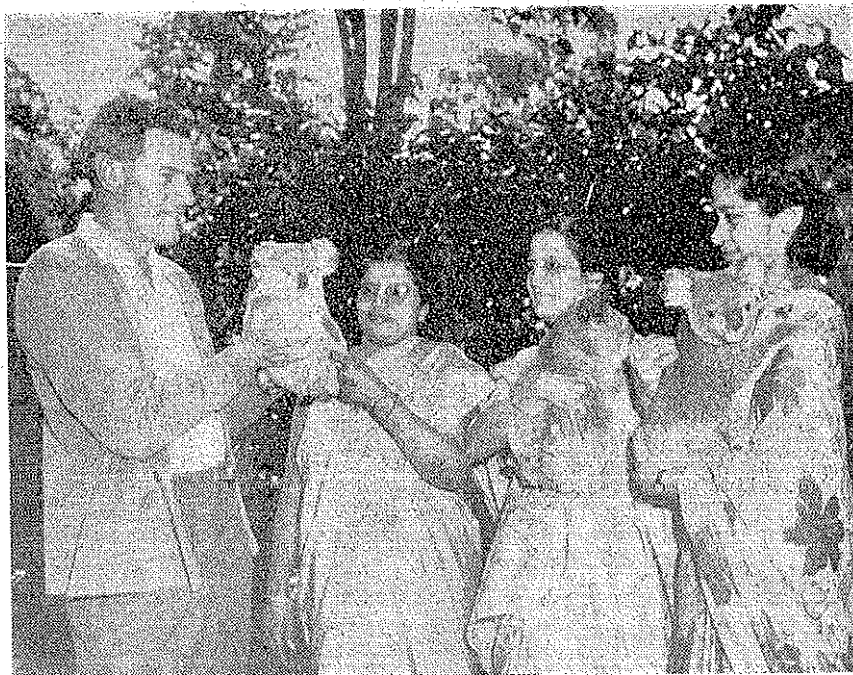
first rule with the sick". A majority of patient's complaints about their hospital care is the result of the failure on the part of the nurses and doctors to establish satisfying inter-personal relationship.

The great luminary Sushruta mentioned in his Samhita that 'strong emotions and passions cause physical ailments which may require medical treatment and sometimes even surgery'. This clearly shows that even many centuries ago, psychosomatic view point of illness has been studied, recognised, and treated. Application of psychosomatic concept in medicine is one attempt to bring home to professional workers the importance of inter-relationship between the body and the mind which functions as a 'harmonious one' rather than two dissociated parts.

Indian Nurses attend Australian Convention

Three Indian nursing sisters were among the 1,000 delegates at the biggest nursing convention ever held in Australia in Brisbane, capital of the State of Queensland, recently. They heard a series of addresses by academic and professional experts and were guests of honour at many social functions. They are Mrs. Prem Saxena, a tutor sister at the Tuberculosis Centre, New Delhi; Miss Kusum Joshi, a tutor sister at the Karnatak Medical College Hospital, Mysore; and Miss Mariamma Chandy, a sister at the Government Medical Hospital, Madras.

(With acknowledgement to Australian News and Information Bureau).



The Indian Nurses visited a sanctuary for koala bears near Brisbane. From Left: Mr. Alan Reid, Manager of the sanctuary, Miss Mariamma Chandy, Miss Kusum Joshi, and Mrs. Prem Saxena.