

How I, with my Special Training, can Help the Family Planning Programme

By

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Ed.

INDIA is the second most populous country in the world having a population of about 500 million, according to the 1966 census. This population will be doubled in less than 40 years and quadrupled in less than 70 years if the rate of growth is not checked. The reason is that advanced medicine has reduced the death rate without any corresponding reduction in the birth rate.

Every day about 30,000 babies are being born in India; and to support these babies 2,400 new houses, 14,400 kilogram of extra food and 240 primary schools are required. Where are these to come from?

So, it can be seen, that the most urgent problem facing India today is control of her population growth. It is more urgent than the language problem, the corruption problem, and the rising price of food problem, put together.

A programme has been launched by the Government of India for the masses to be educated in family planning methods. This programme can best be propagated by the active participation of all nursing personnel in the Family Planning Schemes. The nature of her work brings the nurse into close contact with scores of people everyday, in hospital wards, in out-patients' departments, in clinics, in the public health field; and not only with patients, but also with their families and friends.

I, as Public Health Nurse Tutor can make my personal contribution in the following ways:

1. In the class room, I can teach the students, from the first to the final year, the concepts of family planning, making the clinical teaching part of the nursing curriculum, and correlating it with other subjects. I can also arrange suitable Family Planning field experience.

2. In the out-patients department I can arrange health talks through group discussions, demonstrations, and other visual aids in a planned way; and also as occasion and opportunity arise.

3. In indoor wards I can also arrange health talks, demonstrations and visual aids, for the patients and their visitors.

4. Also, on my rounds in hospital wards, when evaluating the students' achievements in nursing care, I can speak to the patients individually on the need for family planning and the methods to employ.

5. When patients show an interest, I can take them personally to Family Planning Clinics situated in the hospital; or I can direct them to the clinics nearest to their homes by consulting a comprehensive list of Family Planning Clinics and Centres.

6. In addition to this, I can assist the Matron in organising Family Planning Orientation and in-service Education for Trained Staff and Class IV Staff. Here I can be particularly persuasive in educating these classes of persons to set a good example by limiting their families to two or three children.

7. In the field, when I take out my students who have been assigned field work, I can do house-to-house survey and find out who the eligible couples are for family planning education. I can explain methods to them, and induce them to avail themselves of the methods available. If it is provided, I can distribute contraceptives; and I can follow up vasectomy and IUCD cases.

In addition to giving people medical advice, I must convince thoughtless parents that it is cruel to bring children into the world for whom they cannot even provide one square meal a day; and that it is the quality and not quantity that counts.

To convey all aspects of this message that the small family is a happy family there is no body of workers so suitable as nurses and nursing auxiliaries, who are the workers who carry the bulk of the medical services in hospitals, maternity and child welfare centres, domiciliary health care, school health service, rural health service etc.

I'm sure that, like me, every nurse can say "I, with my special training and opportunities for influencing the public mind, am the most competent to help in the Family Planning Programme".

The Third S.N.A. Biennial Conference—(Contd. from page 298)

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cutive for inviting the Conference to Vellore. The success of the Conference was in the team work which was amply displayed.

MISS I. DORABJI
General Secretary,
TNAI.