Nursing Education in India Today

By

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IN one of the recent issues of the *Nursing Journal*, I came across the following item under the vacancy column—"Applications are invited for the posts of student nurses—number of posts vacant "X". Interestingly enough this phrase "Post of student nurses" conveys a lot of meaning and to some extent truly depicts the present status of nursing education in our country. Application for a "post"—meaning that the student is one "employed"—further the term "student nurse" requires our attention too. It is very rarely that we hear references made to student of medicine, law and engineering as "student doctor", "student engineer" or "student lawyer", but yet it is consistently applied to the nursing student and it is perhaps this terminology which makes one to expect her to be a "nurse" while she is yet a "student". Unfortunately, those who have such expectations are members of our own profession who have failed to recognise that nursing has come a long way from the original apprenticeship system of training to have obtained an integral part in the university today.

Let us take a glimpse of a typical picture of an average nursing school in our country. The school is often under the control of a Hospital Board. The student enters the school, perhaps after an interview, if there are sufficient number of applicants. During the first three months the student is subjected to a period of intensive study of basic sciences and elementary nursing. Very soon she is expected to give a certain amount of care to the patients and could even be assigned for night duty with senior students. As she enters her second and third year her classes may average about six hours a week or an hour a day, given perhaps at the end of a long day, or in the midst of a busy morning when the student cannot give her undivided attention to study.

In some instances the instructors carry heavy service responsibilities with very little time for personal guidance of the students. The shortage of staff nurses makes student instruction impossible on their part. The student works under situations charged with tensions with little help from the harassed busy ward sister. Emotionally traumatic situations which may confront this young adolescent are not often perceived by the supervisor. The clinical rotation is often geared to the service needs, rather than to the student's individual needs as the cost of her education is to be made up by this service which she renders the hospital.

An enquiry into the basic curriculum reveals many deficiencies. There are yet some schools which are not able to meet the minimum requirements of the Indian Nursing Council in relation to teaching and clinical practice. Further, residential, library and recreational facilities available to the nursing students are not comparable to what her counterparts enjoy in other educational institutions.

It must however be pointed out at this juncture that the above description is not true of every school in our country. Neither could we overlook all the progress which has been made in the recent past to enforce approved minimum standards of nursing education and practice. Yet, we cannot also fail to be cognizant of the fact that we have a long way to go to establish an optimum standard of nursing on a national level.

What can we do in order to improve the present status of nursing education? One of the important factors is to understand the modern concept of nursing. Nursing involves a great deal more than the traditional function of care during illness. Today's nurse has equal responsibility to her community for health building and prevention of illness. She must be aware of the psychological, spiritual and social needs of the patient and meet them adequately. She has to function in a more complex setting with a greater number of members of health team contributing toward patient care. The vast knowledge which has been added to the various spheres of medical sciences and the intricacies of surgical technique which have been developed, have increased the nurses' responsibility for making independent judgements in her role. Some fail to see this challenge offered to the nurse of today and regret that the "good old days" are gone. As it has been pointed out beautifully by Mary K. Mullane, "Although nursing functions have changed the spirit of nursing remains the same; nursing still requires as taught many years ago, the head, the heart and the hands. But now the head needs to hold more; the hands must be even surer and more skilful and the heart must open wider as the head and hands become busier".[1]

If, such a role as described above is expected of the nurse to be performed, then our curriculum has to receive careful attention. It should not only include various sciences and humanities but must provide for opportunities to develop desirable interpersonal relationships, communication skills and other social skills required of the nurse. Besides, the practical experience should be well planned and adequately guided in order to develop efficiency in nursing care

which can be learned only at the bedside of the patient.

Having understood the type of nurse we wish to prepare, the next matter of consideration would be the educational system which would produce such nurses. As pointed out in the Report of the Committee on the Grading of Nursing Schools[2] and by Bridgman[3] a better system of nursing education can be achieved only under certain conditions.

(*a*) We must believe that preparing to be a nurse is an educational enterprise and like all such enterprises it should be controlled and directed by a group of persons *primarily* interested in education. This group should decide on all matters of educational policies.

(*b*) We must recognise that professional education is expensive and like all such education, the nursing student should be prepared to pay for her education. Hospitals should not have to bear the whole cost of nursing education.

The School of Nursing should be financed on the same basis as other institutions of higher education—receiving support from tax funds, endowments, gifts and student fees.

"Paying for Nursing Education" may not seem a realistic appeal to the people of our country but it is an idea which we have to sell the public and the future students. It will result in increased prestige, better conditions and a true student status for the nursing students.

Another aspect of the problem perhaps would be, "Do we have sufficient number of graduate nurses to meet the nursing needs of the country if the students are not used for service?" But until we are convinced that we need graduate nurses to give efficient care to the patients we would continue to depend on the semi-skilled care given by students and less attempt will be made to produce the required number of graduate nurses.

Finally, if nursing education must improve, nursing service conditions must also improve. A school with an ideal philosophy, independent budget, well planned curriculum, adequate facilities and efficient teaching personnel cannot achieve its aim if a suitable clinical field is not available. The standard of nursing attained by the student would be in comparison to what she sees practised on the wards. Changes must take place rapidly in the clinical situations to keep pace with our changing concepts and a higher standard of nursing must be practised in our hospitals.

A careful study of situations in many of our schools would thus reveal that we do not meet the requirements for professional education. Therefore, there is an imperative need for the hospital administrators and nurse leaders to review the current patterns and bring about such changes which would be feasible within the cultural and economic limitations of our country.

Bibliography

1. Mullane, Mary Kelly. "Has Nursing changed", NURSING OUTLOOK, 6 : 323, June 1958.

2. Report of the Committee on Grading of Nursing School, "Nursing Schools Today and Tomorrow", New York City, 1934.

3. Bridgman, Margaret, "Collegiate Education for Nursing" Russel Sage Foundation, New York, 1953.

4. Brown, Esther Lucille, "Nursing for the Future", Russel Sage Foundation, New York, 1948.

BOOK REVIEWS

Diabetic Manual

by

SUDARSHAN KUPPUSWAMI

Available from the Safdarjung Hospital, New Delhi-16.

Price : 75 nP. plus postage

This 26-page booklet is the outcome of long experience in successful dieting of patients attending the Diabetic Clinic.

To be a successful dietitian is not easy, but Mrs. Kuppuswami aims to not only provide the patient with a varied diet, but chooses foods easily available throughout the country. Diets for vegetarians and non-vegetarians are listed.

There are several tables of foods giving their nutritive and caloric values. Other chapters include Urine Testing, Insulin Injection and other information of interest to the diabetic patient.

Good value for the price and a useful little booklet to have in O P.D. and medical wards as well as a realiable guide to recommend to the diabetic patients.

L.D.

An Introduction to the Study of Diseases

by

WILLIAM BOYD

Published by : Lea & Febiger, Philadelphia

Price: $7.50

This is an excellent book which every nurse must read to understand her work more fully.

Part I. The first chapter is a quick and reasonably good review of physiology. This is followed by a chapter on History of Medicine from Hippocrates to the 20th century; an impressive background for the study.

The third chapter (the causes of disease) gives a broader perspective by presenting a complete but brief picture of all possible causes of diseases and includes clinical and laboratory methods on diagnosis.

The following two chapters are in a way detailed illustrations of various aspects discussed in chapter No. 3, but with special reference to various organs or physiological aspects of the human body. These include such topics as dilution of blood, balance of body fluids, bacterial infections, viruses and a chapter on neoplasia and radiation maladies. Included in the discussions on diseases of special organs are such topics as a heridity in disease etc.

Part II. Consists of 29 chapters each dealing with different parts of the anatomy and the diseases that affect them. While the diseases of heart and lungs find a chapter for themselves, all other diseases of the upper alimentary system are given in one chapter.

In the final chapter devoted to patient care one expects more reference to nursing. Although it has some important references to the nurses' viewpoint, nursing is treated as one of the aspects in the list of many para medical workers and the discussion on the relative role is very interesting. This chapter and the chapter on fluid balance will be of immense value to nurses.

On the whole the approach is novel, language is simple and the lay-out is attractive. The appendix on prefixes and suffixes of terms of Latin and Greek origin, give added value to this volume.

All nurses, specially those preparing for post-basic courses should go through this book. A number of volumes ought to be included in libraries and students encouraged to use the book as reference for their assignments, specially such assignments as may require self-exposition.

For Nursing Tutors, I would say that this book should be a 'must' in their reading list. There is much in it which will help Tutors in reorientating the teaching programme in the light of recent approaches, such as "patient centred care" and "comprehensive care" etc. I hope every library will stock number of copies of this book.

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