

Role Played by a Nurse in a Rural Health Team

by Achamma Thomas

Associate Professor of P. H. Nursing, School of Nursing, C.M.C. Hospital, Vellore.

THE Nursing profession is as old as the Medical profession and its progress followed the same pattern of medical profession.

When we hear the word "nurse" the picture comes to our mind of a girl dressed in a white uniform by the bedside. Early days, she looked after the illness, but her consideration for the individual was very limited. Later on she began to think of the patient as a person with illness, under her care. Now her interest circle is still more wider and she is beginning to think that patients have families, with various problems. The environment in which he is staying may have something to do with his present illness. So she even tries to find this out from various sources to help the physician to come to a correct diagnosis, and treatment and for her to look after the patient intelligently. Thus she takes care of the patient, helps in quick recovery and teaches him some simple measures of healthful living.

Her interest does not stop there. She is interested in his life at home after the recovery. As she has other patients in the hospital it is not possible for her to follow the patients in the home. In the community there is another nurse who is interested in the welfare of the patient. She takes over his care, helps the patient and family to make the necessary adjustment to prevent the recurrence of the illness. The nurse in the community with her wide experience in the preventive work continues to observe the environmental condition under which the patient is living. Here she sees that the water they drink is not safe, the kitchen is smoking very badly, the children are not protected against common communicable diseases and the food that they eat is not well balanced. The whole family is her concern. Her contact in the hospital in the acute illness, and her continued interest in his welfare at his home have

convinced him to consider her as a valuable councillor. The nurse can easily make him understand the importance of a latrine and safe drinking water for the prevention of typhoid, cholera and dysentery. The use of smokeless chula to save the time and money for fire wood for cooking and keeping the house free from smoke. Her technical knowledge is not sufficient to help the family to install it. The sanitary inspector or the village level worker in the field is the technical assistant to whom she can look for help to solve these problems.

The food they take is ill balanced and the money is not enough. She looks around, and finds a lot of land lying waste, where they can start a kitchen garden, which will supply them with vegetables. No milk or egg is available for their daily use. If they start a poultry, or buy a good cow, this problem can be solved very easily. These days the villages are blessed with Panchayat Union Organisations with all its funds and technical help. Thus we can improve their family income and the daily diet. Also it gives them a joy of doing and getting things from their own effort. She can refer them to such places for help.

Sometimes we may wonder why the patient is not cooperating with us, when we are trying to help them. I have learned of doctors and nurses saying, why do the patient behave like this. Finally we label them as non-cooperative and indifferent. There will be some reason which we cannot understand and we do not have the training to probe into that matter. In such conditions the social worker is a valuable asset for us.

Thus the nurse acts as a caretaker when the person is sick, a teacher, a councillor and adviser and a sincere friend for him to choose the healthful way of living.

The nurse gives help and guidance

to the health visitor and the midwife, who are working very closely with her fulfilling some of her duties in the field.

The nurse in the community works as a liaison between the doctor in charge of the health programme and the people. She works in very close contact with the people. She knows what their needs, difficulties and shortcomings are. Her knowledge about the community is valuable help for the doctor to plan the programme. If we do not offer what the people want, our programme will be of no use. Also she goes back to the people and gives them the information about the health programmes that are available for them, how to make use of them and help them to benefit by it.

Thus we are many in the health team, with different preparations, each one is important, each one of us needs the help of the other and we are comrades working together towards the same cause of bringing health—the complete physical, mental and social well being and not merely the absence of disease or infirmity—the birthright of every citizen of our country.

We as nurses working in this team should remember, no matter where you are, either in the hospital or in the community, we take care of sick person, under the direction of a doctor who is treating him.

Your success in the work depends upon you, you as a professionally trained person the community will have high expectations of you. They want you to live up to what you say. They will be watching every step of yours. Their yardstick for you may be little more stricter. Your social and moral life on duty and off duty counts a lot. Your honesty, sincerity, alertness, punctuality, concern for the people and fear of God has something to do with your success in this endeavour.