

The Role of Public Health Nurses in Tuberculosis

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What is Public Health ?

The modern concept of health is not the mere absence of disease or ailments. At its best it implies a complete adjustment of man to his total environment, and is concerned with his physical well-being, his mental well-being, and his social well-being. This concept is one of comprehensive service and implies a positive approach in every direction. With emphasis on prevention, effective Public Health work necessitates a wide degree of technical knowledge and skill, and the application of this knowledge to the home environment.

The Development of Public Health in Different Fields

Progress in Public Health has been slow and halting for many centuries. Organised Public Health work in a positive sense is little more than a hundred years old. Since the end of the First World War, progress in the field of preventive medicine has been particularly rapid. There have been a definite increase of interest by the Governments and populace of many countries in favour of better health, which has resulted in organised community effort. This work covers a wide field and includes maternal and child care, school health, tuberculosis control, communicable disease control, venereal diseases control, industrial health, environmental sanitation, bed-side care of the sick and health education.

What is Public Health and Nursing ?

It is often said that "prevention is better than cure". Moreover prevention is *cheaper* than cure. The Public Health Nurse has an important role to play in preventing disease and preserving and promoting health. Today, in many

countries the Public Health Nurse is the member of the Public Health team that renders personal service to the individual and the family, wherever people are found in homes, in schools, in factories.

Public Health Nurses are vital for any national health programme, for it is necessary to educate the people because a large measure of sickness and impairment of health results from ignorance of simple health rules. Health begins in the home and the Public Health Nurse has the greatest opportunity of contacting the individual and his family to teach personal and environmental hygiene. Considering tuberculosis specifically, its infectivity is a sufficient factor to make us realize that its prevention and cure require public health measures, rather than merely individual care and treatment of the patient.

The mortality and morbidity of tuberculosis are very high in India. Appreciating that we are deplorably short of sanatoria and tuberculosis hospitals, it is clear that our major means of coping with our tuberculosis problem is by the care and treatment of patients at home, and this is where the Public Health Nurse has an especially important role. She is primarily concerned with the treatment and education of tuberculous patients and their families, teaching and supervising other health workers such as health visitors and mid-wives; and in the organization and administration of tuberculosis clinics.

Much of her work must be carried on through Health Visitors and other trained health workers but, unless such other workers are well trained and suitably supervised, they cannot be expected to carry out the necessary work required in any domiciliary programme for the treatment of tuberculosis. The

Health Visitor's duties must be carried out under the careful supervision of a Public Health Nurse. For example, among the most difficult problems in the treatment of tuberculosis at home is that of ensuring that patients take their medications regularly. The new treatments for the disease may require drug taking for a period of a year or even longer. Patients are not natural medicine takers and they must be constantly supervised to ensure that they observe the treatment regimen. The Health Visitor, under the supervision of the Public Health Nurse, must visit the homes of patients frequently, particularly during the early months of treatment, and by constant persuasion and explanation make patients understand the importance of taking drugs regularly. When patients begin to feel better they tend to neglect or forget the regimen of treatment; and many of the complications of irregular drug taking, such as the development of drug resistance, must be well understood by the Health Visitors if they are to be able to convince patients of the importance of regularity in drug taking. The Public Health Nurse who is the link between the Doctor and the Health Visitors, can best explain this kind of semi-technical information.

The importance of other factors in a patient's recovery such as rest and diet, which before the arrival of chemotherapy were often the only treatment patients received, must be understood by the patients. This can only be done if a Public Health Nurse can supervise the teaching and discussion of the problems with the patients.

A patient's home is the most obvious place to teach preventive measures. Each member of the family is aware of the disease and

the burden it presents, and is therefore particularly receptive to guidance and instructions. The problem of isolation of the patient, separated maintenance of toilet articles and eating utensils, the disposal of sputum, and the importance of careful coughing to protect contacts, are all basic.

The Public Health Nurse is also responsible for teaching Health Visitors the importance of contact examination and follow-up.

I have mentioned some of the aspects in which the Public Health Nurse must train and supervise Health Visitors in connection with the treatment of patients at home. Perhaps even more important is the responsibility of the Public Health Nurse in organizing and supervising a Tuberculosis Clinic. Every tuberculosis clinic must include medical staff, nursing staff, home visiting staff and, some large clinics, will also include social workers or occupational therapists, in addition to the usual clerical and cleaning staff. Each of these sections can only do their work well if the clinic routines are well planned. The highest standard of service to the patients can only be maintained if a Public Health Nurse concerns herself personally with the co-ordination of the work of the various people in the clinic. None of the other clinic staff has been trained or can be expected to undertake this co-ordination, and many a clinic fails to fulfil its function efficiently because of the neglect of the day-to-day supervision which a competent Public Health Nurse can give.

The first concern of the clinic is obviously the patient, and every effort must be made to see that the patient's needs are met in the best possible way. This means that case papers must be maintained in a satisfactory and easily accessible manner, so that the doctor can depend on a patient's past history being available whenever he needs to see the patient. The findings of the Health Visitors must be properly recorded, and Health Visitors records need regular scrutiny to see that visits have been carried out, and that the doctor and other

staff, such as the social worker, are kept informed of the Health Visitors' findings. The cleanliness of the clinic cannot be left to the unsupervised attention of junior cleaning staff or even to the casual supervision of a nurse or other staff member. It is the Public Health Nurse who must ensure that the standard of cleanliness and hygiene in a tuberculosis clinic sets an example for all the workers in the unit.

Procedures for ensuring the smooth flow of patients attending, the maintenance of medical and other clinic supplies, the allocation of work to avoid bottlenecks, and an uneven distribution of duties, must all be under the constant observation and supervision of the Public Health Nurse.

It is understandable that the role of the Public Health Nurses is not yet fully appreciated in our country. Their training is still in its infancy and they are not given full opportunity in their appointments to use their experience and training. Unfortunately not many nurses are attracted to this aspect of nursing.

Public Health Nurse Training Centres in India

There are two institutions in India offering post-graduate Courses in Public Health. The All-India Institute of Hygiene and Public Health, Calcutta, and the Lady Reading Health School, Delhi. The course is for ten months following the completion of four years training in General Nursing and Midwifery.

Two institutions, the Health Centre under the Directorate of Health, Madras, and the College of Nursing, New Delhi, offer an orientation course in Public Health. This course is for three months after the completion of the four years nurses' training.

Five institutions offer a B.Sc. degree course in Nursing, in India. This training is for four years with greater emphasis on Public Health than in the General Training Course. The B.Sc course includes tuition in Public Health Nursing and administration, sanitation,

communicable diseases and control, maternal and child health, pediatrics, microbiology, psychology, sociology, mental hygiene, personal hygiene, school hygiene and industrial health.

At the present moment the integration of Public Health in the basic nursing curriculum is being tried almost in every Nursing School from the first year of General Nursing but this will not fundamentally alter the position.

In all there are about 300 Public Health Nurses in India today and about 75 Public Health Nursing students under training. Of these only 50 Public Health Nurses are working in the Tuberculosis field. It is instructive to estimate what a Public Health Nurse can perform in the Tuberculosis field. The National survey of the prevalence of Tuberculosis has shown a prevalence of approximately two per 100 population in the cities. Thus, a city with a population of 50,000 would have 1,000 patients requiring treatment. One Public Health Nurse could effectively supervise such a number if she had under her ten Health Visitors which is a reasonable number of Health Visitors for a Public Health Nurse to supervise. Thus, one can say one Public Health Nurse will be able to look after the tuberculous families in a population of 50,000.

It would be very desirable to have Public Health Nursing courses in each State and to select for them experienced and good candidates, and to provide the facilities that are needed for complete and thorough training.

I would suggest that tuberculosis workers should discuss not only the treatment and management of the tuberculous patients, but the role of Public Health Nurses in tuberculosis, their exact duties and the difficulties in carrying out those duties, and, perhaps, most important, the ways and means of making the best use of Public Health Nurses.

**A Paper read at the
Tuberculosis Workers
Conference**