

Public Health Section

The Role of the Public Health Nurse in Hospital and in other Health Programmes

By

Achyamma Thomas

You all are familiar with the nurse and what she does. We all know that she gives bedside care to the sick, but who is Public Health Nurse? 'Public' used to be thought of as the community and the Public Health Nurse is one who deals with the community. Today Public Health has a much broader meaning. There is a book written and entitled "Public Health is People". Every nurse deals with the people. So, today, no matter where the nurse is, and no matter what she does, she should be a Public Health Nurse.

How does she prepare herself to fill this role? Not every nurse can go away and take a Public Health Nursing course, but every hospital and every nursing school can so integrate health teaching into the nurses education that every nurse will feel that health teaching is always included in good nursing care. To equip nurses for this purpose there must be specially qualified people on the staff of our hospitals and nursing schools to act as teachers and consultants. Just as we have made provision for special training for sister tutors, ward sisters and administrators so should provision be made to educate nurses in public health. There should be at least one nurse who has had public health nursing education, on every hospital staff to act as a consultant and guide in the integration of Public Health throughout the whole basic programme. At present we have not achieved this goal, but it should

Miss Achyamma Thomas is the Public Health Nursing Supervisor in charge of the Public Health Nursing Programme in the Rural Health Centre of the Department of Preventive and Social Medicine, Christian Medical College, Vellore.

be our aim in the near future.

The present health conditions in India call for the services of nurses, especially the Public Health Nurses.

The average life expectancy is :

India	32	in 1952
New Zealand	67—88	1931
Australia	67	1932-34

Infant death rate :

India	116—1000 live births
	1952
Sweden	20—1000 —do—

India's infant death rate is second highest amongst the recorded countries in the world. Nearly 1/2 of the total deaths are among children under 10 years, and one half of these take place in the first year of life. The incidence of preventable diseases like malaria, tuberculosis, small pox, cholera and typhoid is very high. The beds available to take care of these sick people are very few, that is only —0.24 per 1,000 people. From this it is evident that the health needs of the community are great.

There are a few people who are able to recognise these needs, but they do not know what to do about it. There is another group who do not even know that there is such a problem existing. These problems can be solved to a certain degree if the people know some of the simple hygienic principles in living.

The government and private institutions are trying to meet the health needs of the community in different ways. The two Five Year Plans were formulated to implement this attempt. The old concept about health was just absence of disease. According to World Health Organisation definition it is more than that: *Health is the complete physical mental and social well-being and not merely the absence of disease or infirmity.*

If some countries are able to cut down their morbidity and mortality rate to the minimum, we could do the same. The Public Health Nurse, an important member in the health team, has a lot to do in this field. How are we planning to solve these problems?

People who are sick need care and attention. While we are taking care of them we can teach them how to avoid recurrences of the same illness and at the same time how to promote and preserve health. A person who is in need will be willing to receive any kind of instruction from a person who is really taking care of him. So a nurse has a tremendous opportunity to teach health.

The educational facilities in our country do not permit all nurses to have special public health nurses' training. All hospitals cannot afford to have enough public health nurses to meet all the needs. If we have at least one public health nurse on the staff we can use her as a consultant in carrying some of the patient health education programme in the hospital. Also she can help in organising the staff education programme so that those who did not get the opportunity of becoming public health nurses, will be able to learn to do some of the things a public health nurse does, e.g., Patient teaching (individual and group), preparing the patient

for discharge from the day of his entrance to the hospital.

The public health nurse can organise classes for the non-professional workers, so that they too will know how to keep themselves healthy and thereby help themselves to practice the principles of healthful living. If every worker in the hospital knows something about healthful living and practices in everyday life it will be a good learning environment for the patients and the students.

In OPD she can conduct health talks for the patients. Also she can act as an interviewer. In hospitals where there is no social worker in emergency she takes the place of the social worker because of her knowledge about the community and its resources. Also in places where there are student nurses, the public health nurse acts as a co-ordinator to arrange for their ward teaching experiences in relation to their classroom learning.

In the public health field we can say that the public health nurse is the key person in carrying out all the health department activities. She acts as a liaison between the health department and the community. The needs of the community are interpreted to the health department by her and she thus helps in programme planning. In the same way she is responsible for informing the public about health department activities and thereby public co-operation in carrying out the health activities is obtained. Also she plays an important part in case finding and follow-up work. Her main functions in the field are health teaching, prevention of disease, promotion of health and bed side care to everyone regardless of age, colour creed or political belief. She gives health guidance to mothers and children and treatment for minor ailments. While she is carrying out this function she teaches them the simple methods of preventing illness and promoting health.

She may be a valuable worker, in a research programme. The Department of Preventive and Social Medicine, Christian Medical College, Vellore, conducted a diet survey. There we used

untrained workers for collecting the patients and taking them to hospital. They were not able to give a clear idea about the various tests the people have to undergo. After reaching the hospital the people saw things in a different way and left the hospital without undergoing the tests. Even now the villagers are not willing to accept the nurses word, thinking that they are going to cheat them. Some of the people who were taken by the nurses went back without any misunderstanding. She also helps in keeping records which are used for compiling statistics.

The Government of India is doing Family Planning and it is relying on the nurse and social worker to promote this programme. Most places do not have trained social workers nor nurses trained in this line. Today it is imperative that every school of nursing and hospitals, every health visitor's school and every midwifery school be part of this programme. Each should see that this programme is a part of the education of the student so that they will be used wisely with those who could be educated to make use of it. We must always remember that there is a danger in persuading someone to practise that which is against their religious belief. It may result in mental conflict. Newer methods should be studied and those approved after sufficient research, should be taught by the health teachers.

Above all she preaches health through practising healthful living in everyday life.

A public health nurse is a valuable professional worker both in curative and preventive medical field, and a friend, a health councillor and missionary of health, to the people in the hospital, city, town and in the remote villages.

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had instances where the cigarette tin was used to keep spice in and the *sigree* as a show piece on the mantle. Such lapses are natural and have to be kept in view by the Health Visitors on their repeated visits. We always tell our Health

Visitors to actually demonstrate how to use the outfit and not depend upon mere verbal advice ; and on subsequent visits to have a look at the bottom of the cigarette tin to find out if it at all has been put on the fire or not.

To come to our experiences again, of the 2,090 active pulmonary cases nearly 290 or 13.8% use their own outfit. Of the remaining 1,800 cases nearly 450 or 25% use the outfit satisfactorily, another 1,050 (58%) were sputum free and did not need the outfit. The remaining 300 or nearly 17% are absolutely non-co-operative, and in spite of repeated advice they have not used the outfit regularly. This 17% is the failure for preventive advice. Fortunately this 17% are not infectious.

I need not waste your time in detailing such preventive measures as hand-washing, the care of utensils, bed linen and the general cleanliness of the room etc. This care has to be on the same level as that for any other infectious disease. The Health Visitors have to teach personal and environmental hygiene and to see that advice is observed as regularly and rigorously as the care of the sputum.

We include in our teaching advice about nutrition ; and channel aid *e.g.*, milk, vitamins etc. though to the poorer patients. Financial and other aid, though limited, is also available.

Nursing Education Section — (Contd. from page 224)

10. Improve reading. Practice reading faster. Increase vocabulary by learning the meaning of the new words ; by associating or tying up the word with some other idea already known ; by using it as soon as possible in conversation and writing ; and by reviewing frequently.

11. Learn to use books.
12. Learn to take notes in class.
13. To do creative work :—

- (a) Begin immediately.
- (b) Jot down ideas.
- (c) Plan your time.
- (d) Gather information.
- (e) Use work sheets.
- (f) Discuss it with others.
- (g) Look for new angles.
- (h) Relax with the problem.
- (i) Remember.