

The Professional Education of the Nurse

By

Sumitra Desai R.N., M.S.C.

I am to speak on the subject of the professional education of the nurse so that she is adequately prepared in the role of bringing health to the community.

The theme of the conference "*The responsibility of the nurse in bringing health to the community*", means that we want our nurses to do such work that the community at large attains health and maintains it at an optimum level. This also means that the nurse helps firstly in the cure of the sick and, secondly in teaching people in guarding themselves against such diseases which are preventable. She helps them to attain optimum health and maintain it. With our wider knowledge we know that when we mention health we do not mean just the physical aspect of the human being, but also the mental and the social aspect of the individual. With the widening of the field of health work which now covers much more than just hospital care, it includes clinics, homes, schools and we have to prepare the nurse to meet all demands. Thus we find that while discussing the professional education of the nurse we are attacking a task which is no easy matter.

At present nursing education is largely carried out in schools of nursing attached to hospitals and these are trying their best to meet the pressing demands of our present time, including the new plans that are being put into practice. This has resulted in finding many short cuts and we find courses ranging from 18 months to 4 years in preparing a nurse. Leaving aside the good and bad points of these courses, I would like to proceed on and say that the result of such education has produced nurses with varying degrees of proficiency in work. And I think we should accept that in many cases a so-called trained nurse has been entrusted with such work which has been beyond her capacity, mainly because of her educational background.

Mrs. Desai was a member of the panel who presented the Calcutta Conference theme: *The responsibility of the nurse in bringing health to the community.*

Although she claims to be "just a young educator", Mrs. Desai is a wise observer. She emphasises the essential need for administrators and teachers to plan together if they would wish to develop a sound nursing service and a worthwhile nursing education programme.

There is no doubt that the nursing organisation can do with 2 or 3 defined categories and our aim should be to bring all nursing education under such categories. Even though we may start short term courses the organisers should think of long term plans for bringing these courses under one or the other category.

A big step was taken to bring nursing education on a uniform level when the Indian Nursing Council evolved a curriculum and recommended its use in all schools of nursing for their guidance.

The curriculum was evolved after great thought and suitable additions were made. The recommended curriculum has included subjects like physics, chemistry, microbiology, professional problems and trends, and also health subjects like personal and environmental hygiene, nutrition, psychology, preventive medicine and health problems.

As we go down the list and think over it, we find that the objectives of such a curriculum would be to help the student to develop an increased comprehension of both healthy and sick individuals of all age groups, to study the social and psychological causes of their difficulties, and to individualise the nursing care, and while doing so, help the individual in gaining knowledge about himself and his surroundings so

that he can lead a healthier life, and also help his fellow beings to do the same.

I would request you to make a close study of the recommended curriculum. The council members have made a curriculum, which can be taken as a beginning but by no means the end. As expressed in the syllabus, 'The purpose of the curriculum is to serve as a guide, the suggested hours of instruction need not be adhered to rigidly, there is wide scope for variation and experiment'.

This statement is very true. On calculation it is found that in the first 3 years of the nursing training, according to the rules and regulations of the Indian Nursing Council, 1196 hours are provided for classroom study of which only 815 hours have been allocated to the different subjects giving a surplus of 381 hours. The main point to be realised is that in the recommended curriculum a provision is made for the number of class hours which can be utilised to enrich the subjects already included in the curriculum, or for additional ones to suit the local conditions and needs. Some of the recommended additional subjects can be sociology and economics, whose importance cannot be denied in giving knowledge to the student of social problems, especially related to health. Another subject could be the Public Health Service, its organisation, trends and problems. With the development of Public Health Services in India where nurses have to play such an important role, preparations for such work cannot be minimised. Here I am reminded of Dr. Sarkar's remarks which he made yesterday, that the students are overburdened because of their enriched curriculum which they have to study in addition to the long duty hours. It has already been proved that the nurses need a better basic education. Then isn't it worthwhile to decrease the service load of the student so that they can concentrate on their studies. I hope, with the realisation, eminent doctors like Dr. Sarkar would help the nursing administrators in finding ways and means to decrease the work load of the student and conse-

quently help them to improve their educational calibre.

I have discussed the curriculum first because that is the basis of any educational programme. But that in itself is just a beginning. The real success of an educational programme mainly depends on the teachers, their methods of teaching and evaluation, facilities available to them, and the attitude of others in contact with the student. Out of the 48 hours of work a week that a student nurse is supposed to do during her training, only 6 hours a week are to be devoted to classroom teaching (figures are the recommended hours by the Indian Nursing Council). This gives only the basic knowledge which is to be applied, integrated and utilised in the practical field while they are on duty. To do this the teaching personnel of the hospital, clinic and other places where the student might work, has a responsibility to help the student. This realisation can come only if the nurse educationist puts stress on it, seeks their co-operation and helps the personnel in giving guidance to the students. Health education and health teaching which is so much in the news today, may become meaningless and useless if the student cannot utilise the right opportunity to give the right information to the right person at the right time. She needs help and guidance to do such work in bringing health to the community, and also to prepare herself to become a teacher of health. The usual cry is that personnel are not adequately prepared; by just saying that we do not achieve anything. It is my request to the educationist that a start has to be made, and even if it is a humble start, it is going to gain strength. As we put out better prepared nurses, this problem will decrease proportionately.

It is true the problems of the educationist in the field of nursing are much more complicated than that of any other field of education. The problems arise from the fact that most of our schools of nursing are attached to hospitals where the service given by the students constitute an important part of the real nursing care given to the patient.

Rajkumariji's Message

In relinquishing her office as Union Health Minister, Rajkumari Amrit Kaur sent us the following message :

"I would like you to convey to the Trained Nurses Association of India also my greetings and good wishes. Even though I am not in office I shall continue to take a great interest in this profession, because I feel that no health service can be really good without well qualified nurses who have within them a spirit of dedication."

LAKSHMI DEVI
General Secretary

In the present set up if we are to improve the professional education of the nursing student, it is imperative that the nursing administrator really understands and helps to provide adequate facilities for training nursing students. I am sure most of you would agree that in our hospitals the young women who come to us, come much closer to resembling employees than students. They have to care for too many patients and to do too many things so that they hurry from one task to another with no time to think beyond the driving routine of what they are doing.

There is no doubt that a change is needed. It is the basic philosophy which has to be considered, that of *not* utilising student nurses for service at the cost of their education. They are *students* and should primarily remain as students. This is one of the basic principles which a nursing administrator will have to keep in mind, if she has to deal with nursing education and service simultaneously. No revision of curriculum, or any other step, will help to improve nursing education if the administrator is not fully sympathetic with the cause.

In the first place the administrator can help in getting the right type of students. An effort has been made to get students at least of the matriculate standard but all hospital schools do not succeed in getting all of their students of that standard. From the school leaving examination results we know that there is no dearth of matriculates. Then what is the cause of our not getting them? Have we really made nursing an attractive profession, and above all do we make it

look attractive to the public? I have my doubts, and yet it is true that unless we publicise we will not get desired type of students.

One of the main hurdles in our educational institutions is finance and yet it is to be noted that with the same given resources different administrators would probably provide a different quantity and quality of service and educational opportunities. All ways and means should be applied to get the most out of the financial resources where staff education, expenditure on lectures and other incidental expenditure are concerned. There is no doubt that a lot can be achieved by proper co-operation of the staff which is one of the fundamental necessities for a successful educational programme.

The nursing education has to be harmonious and it has to be a full integrated whole, if the students are to get full benefit out of it. This will largely depend on the co-operation and co-ordination which exists between the educationist and the administrator. The burden lies on these two who, with the assistance of their staff, should be able to provide for such education which not only prepares the student to fulfil her duty as a nurse *i.e.*, that of bringing health to the community; but it also gives her a chance to develop herself as an individual of whom she and others can be proud.

Being a young educator, I may have been optimistic. And I do thank the programme organisers for giving me this opportunity of expressing my views.