

taining a roll of nurses for emergency service in the country.

Nurses on this roll will be called up by the Society for duties in any part of the country during times of disaster, disease or other emergencies. During the period of the service they will be paid an honorarium according to their ranks.

'Service before self' has been the motto of members belonging to this noble profession. Nursing ranks have been depleted by the departure of European personnel from India while the need for more nurses is actually felt by the increasing population and incidence of diseases etc. It therefore becomes necessary for trained nurses to come forward with the high ideals set by Florence Nightingale who provides the inspiration for the profession. Nurses throughout the country will respond to this call to become members of the Society's Roll of Nurses.

Details about the scheme, mode of enrolment, emoluments paid etc., can be obtained on application to the Secretary-General, Indian Red Cross Society, 20, Talkatora Road, New Delhi 2.

Pædiatric Course.

A course in pædiatric nursing has been arranged by the Government of

India, with the help of the World Health Organisation International Staff, at the Irwin Hospital, New Delhi. Nine candidates have been sponsored by the different State Governments to take this course.

Miss N. Toy, the pædiatric nurse in the WHO Pædiatric Team will be incharge of the course.

The course will extend over six weeks.

PROGRAMME

The physical and mental development of the normal child.

Principles of child care and child management including the mental hygiene of childhood.

Preparation of artificial foods for children.

The diet of the child in health and diseases.

The common diseases of childhood.

Nursing measures in caring for sick children.

The administration of the children's ward including contact with the child's parents and relations.

Supervision of staff and staff education.

Caring for Sick Children

BY

A WHO Paediatric Doctor at present working in S.E. Asia

Once upon a time a medical student came home for vacation after having had his first year's practical experience in a hospital for adult patients. Asked by his parents what he was supposed to do next, he said that he was going to work in a ward for children. "But that will be an easy task", he added, "because I have only to apply my present knowledge on a smaller size of patients." No statement in medicine could be more misleading and it is most unfortunate that many doctors as well as nurses still consider a child merely as a miniature of a grown up person. The care of these small patients is

consequently often carried out along the same lines as in dealing with adult subjects.

Due to physical, as well as mental peculiarities of childhood, a child, and particularly a sick one, reacts in many ways quite differently from an adult patient under the same conditions. Moreover, many diseases affecting children are not met with in grown-up persons and *vice versa*. A special skill and experience is, therefore, required from all persons who are engaged in the care of sick children.

The mother is the first person responsible for the maintenance of the well-being of the child. In that capacity, she has the duty to decide whether her child is ill and whether she should call a doctor. This is not always an easy task. The main difficulty met with in dealing with sick children, and particularly with babies, is the fact that the patient is not able to give accurate, if any, information about the ailment. Fortunately enough, major signs of a suddenly occurring illness rarely escape the notice of a watchful mother. It is, however, much more difficult for the mother to detect an illness in her child which develops slowly over a long period. In view of the fact that any single symptom might occur in slight and in serious illness, it would be misleading to give a list of them and to try to indicate which of them are serious. As a rule, a child who seems well to the eye of common sense is well, and the child who looks ill, is ill.

Although it is often possible for a wise mother to decide whether her child requires medical attention, it is the responsibility of the community to assist her in this matter. This assistance can be given in many ways. The most important is to offer every mother the opportunity of continuous medical supervision for herself during pregnancy, and for her child from its birth onward. This is achieved by establishing welfare centres accessible to all mothers and children of the population. In these centres the mother is taught the proper care of the child, including its feeding problem. Many mistakes can here be corrected in time to avoid serious consequences for the child. During these regular examinations, it is much easier for the doctor in charge of the centre to detect signs of a slowly developing disease than for a doctor who sees the child for the first time. Invaluable assistance with regard to the prevention of diseases, such as vaccinations, can also be given to children attending these centres.

The activity of such a welfare centre, run by experienced personnel, invariably lowers the death rate among the children living in that particular area.

With regard to the care of elder children, it is the duty of the community to assist the mother by establishing a school health service, including continuous supervision of all the children belonging to that age group. The responsibility of the school health personnel merely corresponds to that of doctors and nurses working in child welfare centres.

Special skill, experience and ability is required from the medical personnel, both doctors and nurses, who ultimately are going to treat the patient. In many countries, paediatrics—the science of the care of children—is a major and compulsory subject in the training of both doctors and nurses. For instance, in some advanced countries, professorships in paediatrics were established as long as 100 years ago. Undoubtedly, the low death rate among children in such countries can to a large extent be attributed to the fact that personnel specialized in care of children is available.

Unfortunately, the teaching in paediatrics, if it exists at all, is still inadequate in many medical colleges and schools for nurses. This is particularly true for many countries of S. E. Asia. In order to compensate for this deficiency, physicians and nurses are often sent abroad to gain experience in this field. However, during studies in advanced countries, the foreign physician is usually offered the most modern clinical methods for the treatment of children, and these methods often require special facilities. When such a paediatrician returns to his own country, he often finds that many things he has learnt are not applicable to the conditions in his own environment. This is particularly true with regard to the social and preventive methods of approach which are mainly decided by the economic standard of the country. A method used in America or England might be completely unsuitable, for instance, in India. These differences between the conditions in different countries presuppose an intelligent adjustment of the experience gained during studies abroad. It, therefore, must be considered an error to facilitate training abroad of young physicians before they have come to

know the problems and resources of their own environment.

The best way of solving this problem is by creating the necessary training facilities in paediatrics within each country. This requires, above all, doctors and nurses who are readily prepared to devote all their time, energy and interest to this task. Here is one of the most important services which international bodies like the World Health Organisation render and are rendering to many countries of S. E. Asia.

In addition to capable teaching personnel devoted to this subject, an adequate training in paediatrics presupposes the establishment of special hospitals and welfare centres for children, attached to teaching institutions for doctors and nurses. After having gained adequate experience in this primary training field, it is possible for the personnel to begin to develop paediatric services along the same lines in other parts of the country.

Considering the fact that children form about 30 per cent of the total population, the demand for hospital beds for this group of patients is big. It is estimated that the number of hospital beds

for children under ideal conditions should at least be one for each 1500 of the population. For instance, a town with a population of about 300,000 needs a children's hospital accommodating at least 200 beds. In countries with a low social standard and consequently with a relatively high sickness rate among children, this requirement is obviously greater, although unfortunately such countries are often the poorest in equipment for hospitalising children.

The requirements for adequate care of sick children, some of which have been discussed above, are easy to point out. In practice, however, many of these demands are difficult to satisfy in a short time. The creation of an adequate health service for children mostly depends on the economic resources of a country, on an adequate food supply, proper housing conditions and on the educational standard of the people. Progress in any of these fields will surely promote the well-being of the population in which the children undoubtedly form the most valuable part. It is the duty of all concerned, both government services and individual persons, to tackle the problem from all these angles.

The Children's Nurse

BY

A WHO Paediatric Nurse at present working in S. E. Asia

The conception of child nursing as a specialised job is rather new in most countries of S. E. Asia. At a moment when health authorities in this region are striving to improve training facilities in children's nursing, it may be useful to see what is the conception of a children's nurse in countries where she is already a recognised and valued member of the community.

The popular idea often is that the children's nurse must be able to follow the ordinary routines of child care such as bathing, feeding and dressing. She must unfailingly display a good balance

of kindness and firmness with her small charges. She must be capable of administering other medicines or teddy bears according to the needs of the moment.

The children's nurse, either student or graduate, is however trained to have a much broader concept of her work, a concept which may be expressed as any relationship between a nurse and a child wherever a child is. This definitely implies much more than emergency nursing in the hospital or in the home. It includes all the child's normal daily activities—sleeping, eating, education, music, play and so forth. Although the children's