

patient as a human being and a member of a family and a community.

- (2) Health teaching is greatly stressed in case study.
- (3) It guides the student nurse to observe and make use of her experience, to find reference material from books or by asking those in authority, or by going to other parts of the hospital where she may be likely to gain information.

Dangers of case study.

- (1) Distress to a patient from tactless questions.
- (2) Danger of spending more time in writing about a patient rather than in nursing him.
- (3) Coming to regard the patient too much as research material for the nurse's education and not for the patient himself.

Personally, I think these dangers can be overcome. Nurses should be advised to make notes on their cases.

Do student nurses like case study? On the whole, I think the answer is in the negative, but when once done, they feel it has been very useful, as it makes them think deeply and consider every detail, to be able to deal with the subject as a whole.

Are cases studies worth while? Yes, if used well and taught well.

CASE-STUDY IN TRAINING OF PUBLIC HEALTH NURSES IN FINLAND

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The purpose of "Case-Study", or "Nursing Care Study" as it is called in Finland, is to help the student to see the patient as an individual and not only as a case.

One case study, if well done, can be used by the student as a guide in planning the nursing care of other cases of a similar kind.

It is the social side of the nursing care which is brought to the student's attention. She learns to observe the relationship between physical abnormality and mental disturbances; she learns to observe how highly sensitive children are to changes in family atmosphere, and how deeply affected their physical and moral balance is thereby; and, lastly, she learns to know that in Public Health work, or in any kind of social work, one cannot separate the individual from the family unit.

The student does her nursing care-study with special regard to child-welfare, school nursing, tuberculosis or pre-natal care.

She is responsible for the home while nursing her case, which gives her an opportunity "to learn by doing".

At the beginning of her course she is given a home to care for, which is her responsibility for at least four or five months. She is introduced in the home by her supervisor, but later, under the supervisor's direction, the responsibility for discovering the problems, referring them to specialists and aiding in their solution,

rests upon her. In this way she gains the full confidence of the family and knowledge of their difficulties.

The student may visit the home as often as she likes, but she must always consult her supervisor before she makes any alterations or arrangements for the family. She may make her own plans and then discuss them with the supervisor before carrying them out. During this period, she gets in touch with various authorities, such as Poor-Law officers, employers, school teachers, hospital almoners, etc.

Sometimes the student is given a baby or a school child to care for, or she may be responsible for a home where one of the members suffer from tuberculosis, or she may have a pre-natal mother to care for and advise. She makes her notes every time she visits the home, and writes the case-paper when she finishes the case.

In writing the case-paper, she may either follow the outline scheme or write her case in essay form, the latter being more popular as it enables her to find out particulars herself and also what are the most important things to observe.

In the essay form she may divide it under certain headings such as: family history, social history, health habits, health conditions. At the end of the summary, she writes the work done by her, the indication for doing it, and the results obtained.

The study is written in the first person, the student describing the family as she meets them, their problems as she sees them, and how she plans to solve them. This reflects her own personal attitude to the case, and helps her to express her own views, though she must always consult her supervisor about the care and treatment, since the case-study is stretched over a period of four or five months.

The case-paper is then evaluated both by the supervisor and the director of the school. If it shows a lack of professional understanding and social consciousness it is not worth much.

The last question is usually, "What have you learned from this case-study?"

There is much to learn in a distressed home. The student has to try to think out a way in which she can best help the people for whom she is responsible, and how to teach them health care without embarrassing them; but she also realises that she can learn a great deal from the people themselves, as many of them deal with their most difficult problems in an admirable way.

Another kind of case-study used during the Public Health course is that which is applied especially to children. Every student has to stay at least three weeks in a home for normal babies and children. She has to write all her own observations with regard to care, diet, sleep, habits, and has to consider the child from a psychological point of view. Previous to this she attends lectures in child psychology, and she is taught about Binet's intelligence-tests and other tests, which give her the opportunity to carry out her observations according to her psychological knowledge.