

Impressions

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Public Health Refresher Course

It may be questioned:—

1. Why hold such a course?
2. What is its worth?

To those of us, some twenty five men and women nurses from different parts of India, whose privilege it was to stay for this course which followed immediately the T.N.A.I. Conference held in Hyderabad Deccan, it proved through days of fellowship and discussion, that such a course was a desirable and profitable experience.

It served to remind us forcibly again, that whereas in the past we considered ourselves to be primarily concerned with the care of the sick, today, we share responsibility with others for prevention of illness in the community.

The scope of our work has widened and is now in the sphere of social medicine.

Our minds and hearts having been already stimulated and quickened during the Conference discussions, were the more receptive and able to assimilate the information given, and projects presented with so much realism throughout the course.

Hyderabad presented a very fruitful field for this Public Health "ADVENTURE", and our most abiding impressions of all her officers working in the Public Health Education Scheme, were their unstinted giving of themselves in service, and their buoyant enthusiasm, confident attitude and courtesy in performing their duties both in city and village centres.

This fine attitude of co-operation is all the more commendable and appreciated when it is remembered that the State had only launched their Model Health Unit Project for villages three months before and, as they explained, all was in its initial stages.

Dr. Khatri, D.I.G. of Medical and Health Services, Hyderabad State, inaugurated the course with an apt

address on the meaning and scope of social medicine.

Health Museum.

Propaganda and educative work is well established in the city. Evidenced by the existence of a fine up-to-date Health Museum, where we saw posters and projects, models and charts covering every phase of Public Health education portrayed in simple but attractive and realistic style.

Leper Clinic.

At Karwan is a model example of how a clinic should be planned and administered. Doctor Sham Rao demonstrated to us here the differences between neural and skin leprosy, and the great advance made through the use of the new drugs, Avlosulphon and Siocarbazon. The former given orally in tablet form over a period of ten years. The latter is not used so extensively due to its toxicity and cost.

The Health School.

Most efficiently appointed, under the patronage of Princess Niloufer, is a Training Centre for nurses in mothercraft and child welfare. Twelve young women are trained every eighteen months, and ideal living conditions are provided for them. This is a voluntary organization.

The health school has attached to it, venereal diseases, maternity, child welfare and anti-anaemic clinics and a well equipped ambulance for district cases. Ample practice and experience is available for the students.

The unique and advanced feature of this clinic is, that fathers and mothers are advised and treated together; and at regular intervals, instruction is given to men.

Doctor Jubai gave an informative talk on family planning and the methods used for educating the public.

Dr. Maqbool Ali, Assistant

Director, Maternity & Child welfare, gave a most interesting outline of maternity and child care from the first recorded relief in France during the 6th century, through the Industrial Revolution in the 18th century when the condition of women and children was first investigated, up to its present phase. She also gave the group some valuable statistics and suggestions for further promoting public health.

Malarial Research Department.

We were reminded here of the fact that Sir Ronald Ross did much of his research work in Hyderabad, and made his famous discovery on the anopheles mosquito at Secunderabad.

This department provided us with practical information on the preparation and use of D.D.T. in the form of solution, suspension and emulsion.

Model Medical and Health Unit at Pattencheru:

Thirty miles distance from the city, gave us a bird's eye view of a planned health education scheme in action in its initial stages.

Doctor Raghavendra Rao, Assistant Director of Public Health, conducted this tour with untiring zeal. It was a joy and a lesson to see his method of approach to the villager.

One of the Nizam's former palaces, situated amidst acres of lovely garden, provided a most suitable hospital centre which functioned under the supervision of a Medical Officer, and Lady Doctor. Health Visitors, by means of a mobile van, made weekly visits to twenty villages within a five miles radius of the centre.

At Chitkul, a village of 200 families, situated four miles from the Centre, we visited the people's homes and saw the first improvements. A soakage pit, which provides hygienic drainage for waste water from kitchen use; and the community well built up with concrete to prevent surface drainage causing foul contamination of water.

The friendliness of the village people towards those seeking to educate them

in personal and public hygiene habits, gave proof of a correct psychological approach; particularly as the Government are educating on strict economic lines. Educating the people to finance all their own improvements is accepted.

Dr. Raghavendra Rao emphasised

(1) The necessity for public health Acts to implement and give necessary power to medical officers in the execution of efficient work.

(2) The importance of regular weekly conferences of the whole staff of the unit, to discuss progress, make suggestions for improvement, and consider common problems and their solution.

(3) Any public health organization will only be successful where the co-operation of the public concerned is freely and fully given.

A most interesting project in research is in process of development on the production of cheap gas supply for village street lighting. It comprises a pit with concrete lid into which twelve buckets of cow dung and water are poured daily; from this chamber, pipes lead to a gasometer, where gas is stored and finally passed by pipes to light twenty village street lamps. The project is still in a state of conjecture as to its economic value, and leaves one wondering how practical it can be when cow dung continues to be such a major supply of fuel, instead of being used as manure for crops.

Lectures on "Tuberculosis" by Dr. Rahman, and the "Social Aspects of Public Health" by Dr. Raghavendra Rao, were given during the course and a very apt film show depicting prevalent un-hygienic habits of people in streets. Kumari Lakshmi Devi stressed in her paper on "Prevention of Epidemic Diseases", the importance of the public health nurses' adaptation to difficult and unusual conditions, and the necessity for her to initiate simple common sense solutions for the problems which are so frequently encountered in her work. A helpful address by Miss Korah stressed the

minimum requirements necessary for an efficient health centre:—

(1) 3 rooms—one of these a bath room ;

(2) a minimum budget of Rs. 100/-/-.

When choosing dais for training, young and literate ones should be selected.

The qualities of patience, enthusiasm and modesty were considered essential in producing a right attitude for the public health nurse.

Our Secretary, Kumari Lakshmi Devi, opened the discussion entitled, "The Nurse in the Public Health Field", at our final session and several contributed to it.

The "Jet Series", by Doctor Rutherford, and Posters on Public Health Topics were on display and recommended for our use.

In conclusion a resolution was passed, that a request be sent to Coun-

cil, that Public Health teaching be included in the Government Nurses' Training curriculum.

It was the unanimous opinion of all who attended this Refresher Course that such courses are fulfilling a long felt and urgent need in our nursing education programme, and will do much by their regular continuance in awakening in us the supreme importance of an educated and enlightened public opinion in Public Health and Social Medicine.

Sir George Newman says:-

"The object of an enlightened Public opinion in regard to preventive medicine is three-fold:

(1) It teaches how to secure and preserve personal health.

(2) It teaches how to avoid disease.

(3) It teaches the community how best to give its assent to sanitary reform and its consent to sanitary government."

International Council of Nurses

Address by the President

MISS GERDA HOJER, Brussels, Belgium, August, 1951.

Two years have passed since the last meeting—two years of peace and ardent work, showing that the International Council of Nurses is more than well recognised by authorities, by all our Active Members, and no less by individuals of our own and other professions. This is very hopeful, but it also places a great responsibility upon us. We are all here to plan for the next period, so that the work can go smoothly and give the best result for the least effort. You all know as well as I, that this efficient running of the work at Headquarters depends very largely upon the help given by the Active Member.

International Co-operation.

Even if you live away up in the North, in Sweden, you can easily realize that one of the most prominent factors of everyday life of the ICN

is the contacts with other international organizations. First of all, there is the World Health Organization—WHO—asking for the support of nurses. Did not the Expert Committee on Nursing of WHO declare that in a country where the medical science was outstanding, but at the same time where there was a great lack of well qualified nurses, the health and the nursing care of the people was very unsatisfactory? It seems as if WHO realised that even the research work and the planning is very unsatisfactory if qualified nurses are not there to tackle the problems from the beginning. WHO, the Economic and Social Council of the United Nations, the Red Cross, the World Medical Associations, the World Federation of Mental Health, the International Hospital Federation, all ask for interest and support by graduate nurses,