

OPEN FORUM

THE NIGHTINGALES NEED A BETTER DEAL

Dr. K.R. Antony

(The writer, former Health & Nutrition Specialist for UNICEF and former Director, State Health Resource Centre, Chhattisgarh can be contacted at krantony53@gmail.com)

Should there be a separate Directorate for Nurses?

Why not?

With a male dominated Health Administration in majority of the states and doctor centric health services least sensitized on gender equity, this demand is going to raise many eye brows.

Thirty years ago, when a nurse midwife like Mother Virginia, an European nun in St. Martha's hospital Bangalore, who trained thousands of young nurses and doctors like me in the art of midwifery, caring and supporting mothers during the birth-pains, walked around with an aura of unquestioned leadership, affectionate smile and understanding glance to those in agony, imparting confidence to all staff in solving many emerging crisis, nobody could ever think that nurses like her need any paternalistic support of a male to excel in profession. She had cheerful interaction with millions of newborns who do not socially respond other than cry, assertiveness in ward discipline and medical ethics with an infectious enthusiasm and untiring stamina to work. Unfortunately such leadership in nursing profession these days is not actively nurtured in government services.

Nurses are traditionally seen as following the doctor's orders in everything. They always

walked behind the doctors during ward rounds, more so if it is a male doctor assisted him in all procedures and always sought his approval before doing anything needed for patient care, though on many occasions helped him in taking correct decisions on patient management. Their contribution has not been adequately recognized for many decades. Legally, all responsibility is owned by the doctor. Nursing profession historically grew in the shadows of medical profession in spite of the legacy of Florence Nightingale. This has resulted in inadequate attention to its professional growth, awareness and full utilization of its potential to serve humanity.

As part of the health sector reform, there is a growing awareness to give them their long pending due for everybody's benefit, which makes sense in managerial sense. A separate Directorate for Nursing Administration is the proposition. Why?

Seldom is "Nursing" seen as a separate profession on par with medical profession; equally important and distinct in its role. The block is mainly in the mindset of everybody, mainly doctors especially men.

For full recovery of any patient, nursing care and nutrition are as important as curative medications and surgical procedures. Nurses are present day and night with the patients. The doctor is relieved with the assurance that

the nurse is always around on doctor's behalf to take care. It is an essential round the clock service. Nurses are required to and work with all modalities of treatment, specialization and schools of medicine, placing the patient at the core.

Thus, Nursing needs to be given distinct professional status in order to boost its image. It requires autonomy to manage its own cadre and resources and freedom to take decisions. Also the nursing hierarchy needs strengthening to overcome the growth lag hitherto experienced due to continuous neglect and discrimination.

The sheer size of the Nurses cadre in the overall Human Resource capital in any state makes practical sense that they be given responsibility to manage themselves with accountability. The National Rural Health Mission since 2005 has added 80,086 ANMs and Nurses and 9856 general duty doctors and specialists making the Nurse's cadre strength 242,210 in the country which is more than seven times the doctor's strength of 33,714. It is sheer logic that any large workforce requires an administrative structure from bottom to top for better communication and line of control.

At present there are huge gaps in the supervisory pathways of Nurses cadre as a result of vacancies and withheld promotions. So the adhoc Supervisors in-charge at State level are doctors and that too predominantly male with no zeal or vision. Unused fund allocations at the year end to the surprise of many principals of ANM training centers and Nursing Schools and Colleges are a common

scenario. I have witnessed in many districts and states just because Health authorities including District Collectors just do not attach importance to issues of nurses and they do not pass on funds timely even to buy stationeries or do minor repairs.

Another justification for a separate Directorate is the Cadre complexity. Under the umbrella of nursing, there are three different and distinct cadres such as:

- a. Public health nursing personnel - ANMs, LHV's, PHNs, DPHNOs
- b. Clinical nurses – staff nurses, specialized nurses, head-nurses, departmental supervisors, matrons, nursing superintendents
- c. Teaching cadres – clinical instructors, tutors, lecturers, associate professors, professors

A separate Directorate can bring all nursing personnel – clinical, teaching and public health under one unit of administration. At present nurses work under different directors for medical education, family welfare and health services with no coordination of professional activities or information sharing or mutual support.

In some states like Chattisgarh even the Nursing Council, supposed to be an autonomous professional regulatory body, works under the Director of Health Services.

There are a large variety of highly developed educational programmes in nursing such as the diploma course, certificate courses, degree courses, postgraduate courses, M.Phil

and Ph.D programmes. This requires a highly professional comprehensive management system of syllabus approval, quality intake, conduct of courses, examinations and certification process.

Nursing structure at the top is weak throughout the country since there are very few positions at national, state or district level occupied by 'nurses only'. Nursing has been neglected because of low level of leadership development and the poor involvement in policies and decisions. Low involvement in decision making has not fostered growth of the profession—like lack of clinical specializations, for example the top positions in hospitals where nurses are posted as nursing supervisor/superintendent carry huge responsibilities with low remuneration and low authority. Career pathways are poorly developed since there is very little capacity at the top to deal with these issues.

All these are amply substantiated in an evaluation of Nursing Services in Orissa, Bihar, Chhattisgarh, Rajasthan and Uttarakhand by Dr.M. Prakashamma, Director Academy of Nursing Studies, Hyderabad.

The Fifty ninth World Health Assembly urges member states to confirm their commitment

to strengthen nursing and midwifery by actively involving nurses and midwives in the development of their health systems, and in the framing, planning and implementation of health policy at all levels, including ensuring that nursing and midwifery is represented at all appropriate governmental levels, and have real influence. (WHO May 2006)

Having a separate Directorate is not a Utopian idea but demonstrated successfully by The West Bengal Nursing Service which is unique and distinct and is responsible for all aspects of nursing administration such as training, postings and transfer, appraisals and promotion, service information which are maintained well and readily available when needed.

Clubbing of Nursing with the proposed National/Regional Institute of Paramedical Sciences will again go against the principle that nursing is a separate professional entity rather than one of the paramedical disciplines.

Nurses are overwhelmingly women. The professional image, status and involvement in policy making are linked to the status of women in wider society. In conclusion, this great profession of women has to be uplifted to serve as an opportunity and role model for others to enter into this caring sector.

Something to ponder upon!!



A wise man once sat in the audience & cracked a joke.

All laughed like crazy. After a moment he cracked the same joke again and a little less people laughed this time.

He cracked the same joke again & again, When there was no laughter in the crowd, he smiled and said..

“When u can't laugh on the same joke again & again, then why do u keep crying over the same thing over and over again..”

“So, Forget the past & move on..”.

- S. Rajasekar