

M I S C E L L A N E O U S

NURSING SERVICES IN EUROPE: CURRENT TRENDS

A nurse is called upon to take an active part in organizing and analysing the future development of her profession. An article by Miss Nicole F. Exchaquet,¹ from which we reproduce the following extract, is a timely reminder of that fact:

Current trends in nursing services in Europe,—such was the subject discussed by some twenty participants—nurses, doctors, sociologists, research specialists—from ten European countries at a meeting organized, from 16 to 18 December 1970 in Berne, by the Regional European Office of the World Health Organization.

It is, at first glance, a vast subject for so short a meeting. Yet from the outset we found it of absorbing interest, thanks to a series of brief statements in which various speakers set the health services within the economic and social context of present-day Europe. At once this made it clear that our profession's contribution to society cannot be studied in isolation; it has to be viewed in the general framework of the health services available to the population and by close reference to the characteristics of the population. European society is undergoing swift changes through the development of science and technology; it is modifying its methods of production, its organizational structures, its traditional concepts of authority and education. In the industrial, "consumption" society of today the physical and mental resistance of the individual tends to diminish. It is therefore necessary to review the nature of the health services of our countries and the uses to which they are put,

¹ *Revue suisse des infirmières*, Berne, 1971, No. 4.

and to re-examine the contribution made to those services by the medical profession and the ancillary professions. There is likewise need to review the proportion of the national income that is devoted to health; although the proportion is constantly rising, it still cannot meet all the needs of the population. What is to be done in this situation? Should we invest predominantly in the struggle against sickness and in research in pathology, and continue to build and enlarge hospitals? Or should we, on the contrary, devote more funds to preventive services and health education? In what way can we make a rational distribution of our limited resources in nursing staffs?

The participants, working in three groups, sought during a day and a half to define the obstacles that stand in the way of the effective employment of nursing services and in the way of the adaptation of such services to constant changes in science and technology. To this end they closely scrutinized the several areas of the nursing profession: basic training; higher training; practice. We were unanimous in recognizing that tradition has imprisoned the nurse in the limited role of a worker whose physical capacity still takes precedence over intellectual capacity. Nevertheless, she is called upon to undertake activities carrying constantly growing responsibilities—witness the progressive transfer of medical functions to the nursing staff, which, in its turn, hands over a part of its former activities to other auxiliary personnel.

Research has shown that during her career—in which the scope for promotion needs to be broadened—a nurse has to play an administrative role and reveal an aptitude for developing the faculty of judgement and the capacity to take decisions. In the hospital she occupies a key post in the network of communication; she can make a special contribution to diagnostic research and to the administrative aspects of the treatment of patients.

A nurse must nowadays participate in the analysis and assessment of the health services as well as in research into sound health planning at the national level. At the level of government her views should be expressed directly, and no longer through an intermediary. The professional organization, for its part, should take a direct part in the formulation of the general health policy of the country.

What steps should be taken to release nurses from too rigid a framework or too rigid an attitude and to prepare them better for their responsibilities?

Those who took part in the meeting stressed the importance of making use, both in training (basic or higher) and in service, of methods of instruction that stimulate the processes of thought, a critical spirit and the capacity to adjust to constant changes in working situations. They put forward bold proposals for new procedures in respect of recruitment, training and the structural organization of services.

Throughout they laid emphasis on the role of research and on the scope it offers for a sounder analysis of the particular contribution of nursing services within the health services as a whole, for a better use of existing resources, and for a re-examination of the profession designed to adapt it to the developing status of women...

JUVENILE MALADJUSTMENT

The topical nature and importance of the juvenile maladjustment problem in many countries is well known. Because it engenders in youth a feeling of human fellowship and awakens in them greater consideration for others, the Red Cross goes some way to providing a remedy. But the problem, whilst it involves education, morality and sometimes medicine, has also social roots, as shown by Dr. W. Bettschart in an article entitled Juvenile Maladjustment—The Individual and Society¹ from which we quote the following extracts:

The current upheaval of social structures leads us to consider juvenile adjustment and maladjustment and all that this implies. Taboos, often of a secular nature, are transgressed, the distinctions between legality and illegality change, political and economic concepts are questioned and traditions which used to provide security, and which were considered immutable, are abolished. At a time when technology and scientific progress are leading to ever greater specialization, to increasingly thoroughgoing and

¹ See *International Child Welfare Review*, Geneva, Feb. 1971.