

Nursing With A Difference

TRUST Established in Delhi 1998

"Let Each Day Be Your Masterpiece". Galatians 6.9

DISASTER MITIGATION = VICTORY OVER POWERLESSNESS.

Sonia D Kapoor

NURSES - THE NURSE'S PLEDGE AND THE CONSTITUTION OF INDIA

The Constitution of India

1. Nurses of India are the rightful citizens of a huge Nation that prides itself on being the largest democracy in the world. Therefore, every Nurse should be well informed on the Constitution in particular those parts that have special relevance to her/him as a person and as a professional responsible for Nursing Services for people in the Community and in Hospitals; and also to give new direction to Nursing Services in a dynamic complex and changing society.
2. To this end every Nurse must understand the Constitution in relation to education and religion to adequately help Student Nurses to grow into sound understanding from the time of entry into a School or College of Nursing. This is essential to enable each Nurse to live up to the expectation of the Constitution in all areas of her/his practice of Nursing and to effectively help people in the various aspects of their life including helping them to a peaceful death where it is inevitable.
3. Our Constitution is the longest in the history of Constitutions, divided into XXII parts with 395 Articles and 9 Schedules. To date 85 amendments have been carried out in our Constitution and 3 more Schedules have been added.
4. The objectives of the Constitution are embodied in the Preamble which is to constitute India into a Sovereign, Socialist, Secular, Democratic Republic and to secure to all its citizens Justice, Liberty, Equity and Fraternity.
5. Part III of the Constitution which contains 24 Articles is the most important for Nurses like any other professionals, as it explicitly states the rights and duties of the peoples of India. This Part forms the basis and acts as an irrefutable reinforcement to the Indian Nursing Council Act, No XLVIII of 1947 with the Indian Nursing Council Regulations empowered by the Act, and the Nurse's Pledge.

Article 14

Right to Equality

Equality before law, ---The State shall not deny to any person equality before the law or the equal protection of the laws within the territory of India.

Article 16

Equality of opportunity in matters of public employment.--

- (1) There shall be equality of opportunity for all citizens in matters relating to employment or appointment to any office under the State.
- (2) No citizen shall, on grounds only of religion, race, caste, sex, descent, place of birth residence or any of them, be ineligible for, or discriminated against in respect of, any employment or office under the State.

Article 15

Prohibition of discrimination on grounds of religion, race, caste, sex or place of birth.--

- (1) The State shall not discriminate against any citizen on grounds only of religion, race, caste, sex, place of birth or any of them.
- (2) No citizen shall, on grounds only of religion, race, caste, sex, place of birth or any of them, be subject to any disability, liability, restriction or condition with regard to—
 - (a) Access to shops, public restaurants, hotels and places of public entertainment;
or
 - (b) The use of wells, tanks, bathing ghats, roads and places of public resort maintained wholly or partly out of State funds or dedicated to the use of the general public.
 - (c) Nothing in this article shall prevent the State from making any special provision for women and children.

¹[(4) Nothing in this article or in clause (2) of article 29 shall prevent the State from making any special provision for the advancement of any socially and educationally backward classes of citizens or for the Scheduled Castes and the Scheduled Tribes.]

Article 19
Right to Freedom

Protection of certain rights regarding freedom of speech, etc. ---(1) All citizens shall have the right to—

- (a) to freedom of speech and expression;
- (b) to assemble peaceably and without arms;
- (c) to form associations or unions;
- (d) to move freely throughout the territory of India;
- (e) to reside and settle in any part of the territory of India ¹[and ²[***]]
- (g) to practise any profession, or to carry on any occupation, trade or business.

Article 25
Right to Freedom of Religion

Freedom of conscience and free profession, practice and propagation of religion.---

- (1) Subject to public order, morality and health and to the other provisions of this Part, all persons are equally entitled to freedom of conscience and the right freely to profess, practice and propagate religion.
- (2) Nothing in this article shall affect the operation of any existing law or prevent the State from making any law--
 - (a) regulating or restricting any economic, financial, political or other secular activity which may be associated with religious practice;
 - (b) providing for social welfare and reform or the throwing open of Hindu religious institutions of a public character to all classes and sections of Hindus.

Article 26
Freedom to manage religious affairs.--

Subject to public order, morality and health, every religious denomination or any section thereof shall have the right ---

- (a) to establish and maintain institutions for religious and charitable purposes;
- (b) to manage its own affairs in matters of religion;
- (c) to own and acquire movable and immovable property; and
- (d) to administer such property in accordance with the law.

Article 29
Cultural and Educational Rights
Protection of interests of minorities.--

- (1) Any section of the citizens residing in the territory of India or any part thereof having a distinct language, script or culture of its own shall have the right to conserve the same.
- (2) No citizen shall be denied admission into any educational institution maintained by the State or receiving aid out of State funds on grounds only of religion, race, caste, language or any of them.

Article 30
Right of minorities to establish and administer educational institutions-

- (1) All minorities, whether based on religion or language, shall have the right to establish and administer educational institutions of their choice.
¹{(1A) In making any law providing for the compulsory acquisition of any property of an educational institution established and administered by a minority, referred to in clause (1), the State shall ensure that the amount fixed by or determined under such law for the acquisition of such property is such as would not restrict or abrogate the right guaranteed under that clause.}
- (2) The State shall not, in granting aid to educational institutions, discriminate against any educational institution on the ground that it is under the management of a minority, whether based on religion or language.

PART IV

DIRECTIVE PRINCIPLES OF STATE POLICY

6. PART IV OF the Constitution of India deals with the Directive Principles of State Policy. The object of the Directive Principles is to embody the concept of a Welfare State. Article 38 of the Constitution enjoining upon the State to secure a social order for the promotion of the welfare of the people. By Article 39 the State has been directed to focus its policies towards securing—
- (a) that the citizens, men and women equally, have the right to an adequate means of livelihood;
 - (b) that the ownership and control of the material resources of the community are so distributed as best to subserve the common good;
 - (c) that the operation of the economic system does not result in the concentration of wealth and means of production to the common detriment;
 - (d) that there is equal pay for equal work for both men and women;
 - (e) that the health and strength of workers, men and women, and the tender age of children are not abused and that citizens are not forced by economic necessity to enter avocations unsuited to their age or strength;
 - ³[(f) that children are given opportunities and facilities to develop in a healthy manner and in conditions of freedom and dignity and that childhood and youth are protected against exploitation and against moral and material abandonment.]

¹[PART IV A

FUNDAMENTAL DUTIES

7. PART IVA has been inserted in the Constitution by the 42nd Amendment Act 1976 according to which it shall be the duty of every citizen of India--
- (a) to abide by the Constitution and respect its ideals and institutions, the National Flag and the National Anthem;
 - (b) to cherish and follow the noble ideals which inspired our national struggle for freedom;
 - (c) to uphold and protect the sovereignty, unity and integrity of India;
 - (d) to defend the country and render national service when called upon to do so;
 - (e) to promote harmony and the spirit of common brotherhood amongst all the people of India transcending religious, linguistic and regional or sectional diversities; to renounce practices derogatory to the dignity of women;
 - (f) to value and preserve the rich heritage of our composite culture;
 - (g) to protect and improve the natural environment including forests, lakes, rivers and wild life, and to have compassion for living creatures;
 - (h) to develop the scientific temper, humanism and the spirit of inquiry and reform;
 - (i) to safeguard public property and to abjure violence;
 - (j) to strive towards excellence in all spheres of individual and collective activity so that the nation constantly rises to higher levels of endeavour and achievement.]

With these facts before us, Nurses as the largest predominantly female professional workforce of Indian citizens have both freedom and authority to work within the framework of the Constitution of India.

Our fundamental rights have been sealed in the Constitution. Therefore it behooves us to understand and appropriate each Right with the wisdom God will grant when we come in faith to Him to fulfill our pledge.

The various Fundamental Rights, with recourse to Constitutional Remedies if these Rights are violated; provides a secure and beautiful framework within which Nurses may function.

Because we are a 'popular sovereignty' and people are the ultimate authority to decide things then Nurses do have the ultimate authority to decide all Nursing matters within the framework of the Constitution. The following discussion is aimed at helping us examine 'what is' and to see how we may appropriate our Fundamental Rights, the Directive Principles and the Fundamental Duties we owe to our Nation

FACTS AND MYTHOLOGY

Also of significance to Nurses, is the fact that our Indian Constitution is based on ideas of justice and human equality.

God before whom we took our pledge is just, He is our Lawgiver, and He is the judge of the whole world.

"For the Lord is our **Judge**,
The Lord is our **Lawgiver**,
The Lord is our **King**;
He will **save** us"
Isaiah 33:22;

"For **He is coming**,
For **He is coming to judge the earth**.
He shall judge the **world with righteousness**, and
The **peoples with His Truth.**"
Psalm 96:13.

"Because He has **Appointed a day** on which He will judge the world in righteousness by -
The Man whom He has ordained.
He has **given assurance of this to all** by raising Him from the dead."
Acts 17:21

This same God who has given to each person and Nurse an innate sense of truth, justice, fairness and mercy, gives us all the right to justice. Privilege and Rights bring responsibility and therefore He also says to us "**Execute true justice, show mercy and compassion everyone to his brother**" Zechariah 7:9

Because general education is variable in its content and emphasis, many Nurses may not understand that the right to justice was the foundation of the Magna Carta (1215) which gives every person the right to petition for and obtain redress of grievance even by the King, His Chief Justice or any official.

Magna Carta 1215

If we, (the King), our Chief Justice, our officials or any of our servants offend in any respect against any man, or transgress any of the articles of the peace or of this security, and the offence is made known to four of the said twenty-five barons, they shall come to us – or in our absence from the kingdom to the Chief Justice – to declare it and claim immediate redress."

This principle of equal justice is well recognized and acknowledged to be the firm foundation on which the British, American and Indian Constitutions have been built. It is for this reason that Judges, Leaders and Legislators in modern Democracies take 'An Oath of Office' in the name of God:
"So help me God"
to uphold "impartial justice"
and to

"preserve, protect, and defend the Constitution."

With this factual knowledge we are now in a position to see more clearly the Relationship of the Constitution to our own Pledge as the fountainhead of largely untapped Nursing Power.

With increasing insight and understanding Nurses will have the joy of realizing in practice the full potential of Nursing power.

The Florence Nightingale Pledge

I solemnly pledge myself before God and in the presence of this assembly

To pass my life in purity and to practice my profession faithfully.

I will abstain from whatever is deleterious and mischievous, and will not take or knowingly administer any harmful drug.

I will do all in my power to maintain and elevate the standard of my profession.

And will hold in confidence all personal matters committed to my keeping and all family affairs coming to my knowledge in the practice of my calling.

With loyalty will I endeavour to aid the physician in his work,

And devote myself to the welfare of those committed to my care.

GUIDING PRINCIPLES

When we look into the guiding principles and the Spirit of our Pledge it is not difficult to identify our commitment to exercise our Rights and Duties as well as the Directive Principles of the Constitution of India.

On the one hand we have the Sovereignty and dignity of all people as an irrefutable basis for our professional credibility in fulfilling the Duties conferred upon us by the 'State' i.e. the Government and on the other the hand our endorsement of the sovereignty and dignity of all people in the practice of Nursing in the presence of the Sovereign God through our Pledge.

Inherent in both is the endorsement of authority, freedom and power being given and received by each Nurse.

However the key issue facing Nurses today is that of powerlessness due to lack of appropriation of the authority, freedom and power from both sources. In other words be it from ignorance or choice we have not developed the skill to draw on the power invested in us by a Sovereign Government and available to us from the Sovereign God.

This series of papers and the tapes being produced aim to help all Nurses find pleasure and purpose in drawing deeply on all that the Constitution of India and the Sovereign God has made available to us.

SITUATIONAL RESPONSES REVEAL DEFICIENCY SYNDROME

JUST THINK NURSE!

No Deficiency Syndrome

Be it dietary, hormonal, behavioral or from any other cause
Has ever been overcome

Without the application of truth and perseverance

Therefore,

Nurses need to understand the facts and the mystery of the freedom and power given them through the Constitution, Nurse's Act and Regulations and the Nurse's Pledge.

Through lack of understanding many

Nurses have been unable to use their God given legitimate freedom and power thus failing to effectively practice their profession with desired integrity

.Nurse's true *freedom and power* have been sabotaged, revamped through Cultural and Religious customs to be used by Politicians, the Medical Profession and other vested interest groups to blackmail Nurses.

All this has led to reaction rather than to an effective Nursing Response.

MEANS AND ENDS

1. Union Mindset, the basis of which is primarily a selfish aggressive reaction to frustration from powerlessness rather than a measured response to known, experienced, or felt injustice.

The essence and means employed arise from, and give rise to, increasing internal conflict that is transferred within and between professions, ending in 'conflict crisis management' of Nursing Issues.

2. This mindset can be contrasted with a *Unity of mind, heart and Spirit* arising from shared understanding of facts that exploit, demean or ignore the Constitutional and legal Rights of Nurses and Patients/clients, the awesomeness and sanctity of a Pledge taken before the God of all mankind and results in-

Quiet confidence and an unbiased approach to each person in each situation that crosses every cultural, religious and communal barrier. The Nurse has the strength to withstand with dignity the abuse and fear of man and the principalities and powers that prevent Nurses and Nursing being what they ought to be.

Courage that is founded on the Law and firmly grounded in a Pledge will give every Nurse an authoritative voice as a true Advocate for the patient/client and will very often foil the efforts of unscrupulous Doctors/Administrators who take the Law into their own hands.

The outcome may result in a dramatic display of verbal violence and abuse from Doctor toward the Nurse concerned but apart from the ignominy of the situation the Nurse is in control.

While few if any Doctor will admit to this because of their deeply ingrained teaching and need to preserve their 'godlike status' the good in mind and heart will acquiesce. These are 'True Doctors.' The Nurse's strength thus becomes a cementing agent for good intra-professional relations and quality patient care.

On the rare and often not so rare occasions when the Doctor is blinded by his/her ego and the baser instincts of recrimination and self justification take control to the extent that even the Law may be corrupted from the Bribery of the Doctor concerned, the Nurse and patient's ultimate Advocate, our Heavenly Father, will in due course bring true justice to pass.

In Genesis 3:9 God asked the question "where are you" in the Book of Job chapter 40 God demands an answer to His questions and then says "now prepare yourself like a man; I will question and you shall answer Me?"

Nurses can learn much in the way of questioning and finding effective answers by considering the way in which the Lord Jesus Christ addressed the questions of both the ¹wicked and the ²sincere and ³His question and the people's responses:

Refer e.g., the Gospel according to Mathew ¹chapters 22:16-40; John 18:33-38. here the questions were answered in relation to the Law, to the Scriptures and to Truth.

²*Mathew 18:1-6; Acts 1:6 with* these responses we are edified – our understanding is challenged and our expected standards of performance defined; we are given the promise and assurance of the 'Helper' the 'Holy Spirit' to meet the expected standards along with the challenges of living effectively in a world dominated by injustice, deception and lies.

³*Mathew 22:41-45; Luke 14:1-6; Mark 12:24.* here we see the wisdom of God operating in answers that constrain the power of man's clever arguments against truth; in addition the value of reasoning together, perceiving what is truth and being encouraged with the reality of the power of faith and truth available to us that brings greater blessing out of the distress than we could ever envisage.

The following are some questions many Nurses face that without the above knowledge and understanding may result in a less than good response that precipitates a further necrosing of Nursing initiative, effectiveness and ultimately God given power:

WHAT IF?

The Nurse runs the risk of losing her job or position in Nursing through standing for Truth?

The Nurse's income is the only source of income in the home?

Worse still the Nurse's income was the only reason why her in-laws chose her for their son?

Other family responsibilities drain the Nurse's financial resources?

The husband is establishing a Private Nursing Home, a Laboratory, market pharmacy, some other Hospital service, or business, and decrees what the Nurse shall make available from her place of employment including her time to facilitate his success?

The Nurse's husband is also a Nurse who spends most of his day in 'his business' rather than in his professional responsibilities in the School of Nursing or other place of service?

WHAT IF.....?.....?.....?

The wisdom of God is not fickle and He will not fail us even though we may be forced to face extreme distress.

True means for a just end will not be without a price but the personal and professional rewards can only be known as each Nurse steps forth in faith, in and under God and Government given power.

MALPRACTICE IN NURSING

It is relatively easy to talk or pass off malpractice in any walk of life; however every Nurse has a personal, moral, ethical and professional responsibility to:

1. Understand what constitutes malpractice in Nursing,
2. Recognize the implication of malpractice personally and professionally and as a National and International entity.
3. Be able to guard her/him-self against the subtle ways in which malpractice has crept into Nursing
4. Be alert and sufficiently courageous to unite with all Nurses to not only control this menace but to Overthrow and cast it out of our lives and profession.

Malpractice
 Is a direct result of
 'Misuse'
 'Mismanagement'
 'Wrong'
 'Wrong doing'

MISUSE
*Poor stewardship
 Breach of public trust
 Mis-ill-mal-treatment
 Harassment
 Witch hunting
 Victimization
 Child abuse
 Abuse of Office*

WRONG IN NURSING
 Improper Evil
 Incorrect
 Shame Sinful
 Disgrace
 Violation Deviant
 Illegal
 Unlawful Disgraceful
 Abnormal
 Injustice Error
 Bad
 Criminal Scandalous

Malpractice

WRONG DOING
 Evildoing Wickedness
 Misbehavior
 Wrong conduct - Misdoing
 Evil courses
 The Devil's Machinations
 Transgression of the law
 Breach of Trust
Malpractice in Nursing

MISMANAGEMENT

- Bad policy - Involves mishandling,
- Misdirection - Misguidance
- Omission - Negligence
- Incompetency - Mediocrity
- Standing in one's own light
- Cutting ones own throat –
- **Behaving self destructively**

ANALYSIS

All Students entering a School or College of Nursing are taught the right way to function as a Nurse, emphasis is placed on techniques and behaviour so why, as we enter 2003 is Nursing Practice and Behaviour more wrong than right?

Only because too often Nurses are taught what must, ought, or should be done but not the why and how to do.

Our conscience tells us if something is not right, but Nurses come out of societies deeply imbedded in cultural and religious norms, mores, work ethos and differing human and animal values which significantly control the natural or God given human response to life and to the purpose of pain, grief, suffering and death in life.

When Societies are based on and derive their power source from *Mythology* then it is understandable that the above facts may not be understood or internalized. Thus Nurses are severely disadvantaged.

Nurses cannot claim ignorance as a defense to perpetuate the evils of society; in our own lives; or through our Profession. As we help each other to address each issue and have the courage to discuss, pray over and change our thinking and behaviour we will with grace and love combat powerlessness.

Mythology is clearly defined as

1. ***'The figment of man's imagination'*** reinforced and made popular by a good Narrator;
2. ***'Tradition'*** When, why and how did it start are questions avoided or ignored in Nursing to the detriment of Nursing Practice.
3. ***Fabrication*** the production of a composition of ***falsehoods***.

It is time Nurses examined the outcome of our own learning which directly determines the quality and effectiveness of our behavior and professional teaching in the home, community and hospital, in the light of the above facts.

THE INDIAN CONSTITUTION AND ITS RELEVANCE TO NURSES

A critical look at the meaning of ***'Discrimination'*** before we return our attention to the Constitution will help Nurses prepare to more fully understand the implications of the Preamble and Part III and each of the aforementioned Articles 14; 15; 16; 19; 26; 29; and 30. spelled out in pages 1 and 2; Part IV dealing with the Directive Principles of State and Part IVA dealing with the Fundamental Duties of every citizen of India referred to on pages 3 and 4 of this paper.

Discrimination Involves

Selectivity, the Nurse has the ability and freedom to select by picking and choosing

Fastidiousness, the Nurse can choose to be particular, meticulous, conscientious, scrupulous and sensitive in her/his judgments for truth, true justice and mercy in Nursing.

Taste, one of our five senses is taste – good taste = sound critical judgment, discernment or appreciation of excellence, a preference for the best in Nursing.

Integral to taste is the outcome and here the Nurse can produce good and fruitful skills of refinement, and graciousness accompanied by cultivated or civilized ***'good sense delicately and firmly put into force'***. Nurses will be known for 'fine judgment', 'conscienceness of the soul' and the 'fundamental quality of goodness which sums up all other qualities'.

This all leads to fluency and ease, plainness, straightforwardness and directness that enable Nurses to become well rounded with the 'right word in the right place'.

Critical Discernment brings tactfulness, intuition and feeling as well as a good educated ear, and a good educated eye. The result will be flair for good judgment based on insight, perspicacity, refined acumen and analytical skills and the ability to censure

Judgment implies the skills of ***arbitration*** and ***resolution***. *Nurses will have the power to censure and decry that which is detrimental to Nursing Education and Services and to all aspects of patient care.*

Discrimination in Nursing is for Truth

Discrimination in Nursing is against every thing that is an abomination to God and destructively soul destroying to man.

Thus we see that Nurses have a definite choice to continue on the merry-go-round of:-

'Everyone does it so why shouldn't I?'

'I am only one what good can I do?' or

'No one listens to or respects Nurses!'

THE BEAUTY OF WOMAN POWER

To acknowledge that the majority is not always right and we, as individuals and collectively have the authority and fundamental duty to take a stand that will arrest and reverse the present 'State of the Art' in Nursing and the Health Services that justifies the findings and associated disgrace of the 'Health Services being the most corrupt service to the Nation with the greasiest palms'.

The old adage '*The hand that rocks the cradle rules the world*' needs to be carefully re-thought through and by who better than thinking caring Nurses who also qualify as wives, mothers and midwives or husbands and fathers.

Let us re-look at what has been described by an Advocate as 'The beauty of woman power'. There is nothing weak and spineless in this *unless* we choose to reject the 'beauty of God's power filled with grace and goodness available to us'; the power of the 'Helper' (Holy Spirit) in the refining process of all the gifts and abilities with which Nurses – male and female - have been endowed; by choosing to continue to develop the negative attributes that breed powerless destructive-to-self and society aggression.

Each individual whether male or female is in a unique position in Nursing to complement each other for our own enrichment and the enrichment and wholeness of the total health services. Only we can decide whether we wish to be a genuine transforming influence or not.

Inherent in the two little words '*to be*' is a dynamic principle that will, in the process of transforming us make each one an effective transforming influence. What a privilege! What other joy can surpass the effort and at times disappointments and hardship that must be endured to achieve this end?

GOODNESS AND MERCY IN NURSING ARE REALISTIC EXPECTATIONS

While no thinking Nurse
Wants or subscribes to any of the carefully constrained presentation of facts in this series of papers on powerlessness;

Let alone to the much greater seemingly unconstrained unholy practices that are currently insidiously destroying Nursing in Gujarat, our Nation and many Nations of the world. --

Through not being alert,

We have in fact chosen to cling to our grave clothes that are now caught like a sari in the escalator filling us with pain and fear as it spirals downward.

Can we pull ourselves out
Of the quagmire of man's inhumanity to man beginning with Nurse's inhumanity to Nurses?

The answer is a resounding YES!

**Courage Sister,
Courage Brother,
Do not Stumble.**

EDIFIED THROUGH EXPERIENCE

- ❖ Kashmir – Concealed spaces in Ward bathrooms used by terrorists to store arms and ammunition No one safe. Outside crackdowns, inside? Even the Medical Superintendent became a victim of violence from a terrorist controlled staff member.
- ❖ Nurse at home confronted by terrorist and forced to accompany him to hospital. Nurse's response to locals watching helplessly even as they offered words of comfort '*If I have done wrong I am ready to pay the price*' She had not done wrong, dislocation of her days plan was a small price to pay for integrity.
- ❖ Nurse asks Dr. to check a prescription - his immediate response, shock 'Sister how could I!' amendment and genuine appreciation. Nurse's reward - increased dignity and courage for professional responsibility.
- ❖ Nurse requests another Dr. to check a prescription – his volatile anger, aggression, wild accusations and venomous rudeness as he changed a lethal order was the same Nurse's reward or *was it?* A baby's life had been saved; Nurse not guilty of undetected murder. Her authority acceded to, her Nursing power enhanced.

The first a genuine doctor - anyone can make a mistake. The second an ego filled inhuman man parading as a doctor; money, prestige and power his goals and god, not patient welfare or the God of true justice and mercy.

- ❖ A Dr. asks a Nurse relative to administer a drug to her with long term instructions. The Nurse prepared to administer the drug but not according to the prescribed regime explained why. The irate response was inevitable 'I am a Dr...' Nurse's response 'True and you are entitled to have what you want but as a professional Nurse I am telling you what I am prepared to do and give' Outcome Dr. acquiesced and would let no one else give the injection stating that she trusted the Nurse's asepsis and appreciated her skill.

That many die or are permanently handicapped from lethal or ill advised drug dosage because Nurses are too frightened to quietly challenge a Doctor's prescription before administering does not mean the Nurse is excluded from Professional negligence,

- ❖ Two Drs. outside OT using verbal violence stated the Nurses would be incriminated and reported to the Authorities and to the RSS for spreading religion on duty. The Operating Surgeon on enquiring as to the cause of the verbal onslaught was informed that after the Anesthetist present had experienced a distressing outcome some of the Nurses had gathered daily before the first patient arrived to pray for the Anesthetist, Surgeon, Patients, plus details of the days operating schedule.

The Anesthetist had an immediate knee jerk reaction until Nurse quietly reminded him of the date, patient, his concern while administering the anesthetic, the type of surgery and outcome. The Surgeon's response 'do you pray for me too?' and then a request 'please keep praying for me'. These Nurses continue to pray to the Almighty God who heard their pledge and 'with loyalty endeavor to aid the physician in his work' the care of patients.

- ❖ After 22 years of files shuttling one Nurse found a powerful resource that gave her wisdom to develop effective discipline in Nursing, to heal interpersonal relations between disciplines, and achieve essentials for patient care i.e., daily clean linen for a Neonate ICU instead of every ten days, heaters for the freezing cold of winter in Punjab and fans for the blistering heat of summer.

The preceding glimpse of what is possible when Nurses have a firm foundation based on the Nurses Act and Regulations conferring Government Authority, the Constitution conferring personal and National freedom of choice, and the Nurses Pledge, presumes a vision for the task ahead from where we stand *now*, what we are in the process of doing *now*, and the expected outcome from the task ahead.

THE TASK AHEAD FROM WHERE WE ARE!

- ⌚ In Gujarat the Health Minister was scheduled to address a gathering. It was mandatory for Nurses to attend at 9am. Nurses came from busy wards ate the ice cream and went, many literally running. Male Nurse's comment 'We felt so ashamed when the Nurses kept leaving'

Where was the Male Nurse's concern for patient care? Babies, children, women in labor, people scheduled for surgery, people in CCU; ICU emergency admissions, etc., etc.

How much more effective if the CNO had sent a polite note to the Minister on the Dias that due to the needs of patients at that particular hour of the day no on duty Nurses were free to attend. She would have acted on the authority of the Government through the Nurse's Act and regulations and the Constitution plus drawn power from actively implementing her pledge.

These male Nurse's organizational abilities were based on power politics, and status buttering. Such Nurses use a 'good cause' to bring open shame into Nursing by depriving patients of care.

**When the means used by Nurses are not based on truth, justice and mercy
The real value of the end to be achieved is lost in shame and powerlessness.**

- ⌚ Having been treated to a demonstration of the luxuries of a high powered CCU and the daily education of Doctors, it was found that not one of the Unit Nurses had any Continuing Education and no Student or qualified Nurse came to the Unit for any form or education.

Visiting Nurse, 'You have shown the best now let us see the worst in Nursing' Host Nurses with no second thoughts took me immediately to the Pediatric Ward! the state of which defies description. With one patient under 70 in the palatial Unit and the future 'wealth of the Nation' in a totally inadequate Ward where 85 per cent of deaths and diseases are preventable, one must ask 'What values are we Nurses subscribing to in light of the Constitution, Law and our Pledge?'

- ⌚ All branches and major problems in health care have ethical concerns. The days of a wonderful honorable medical profession have passed. As Dr. Daleep S. Mukarji states. "There is corruption, cut-throat competition and unethical practices almost universally. Doctors shunt patients around amongst themselves with real kickbacks to those who make referrals".

⌚ The production and distribution of drugs in India lacks a rational policy that focuses on essential drugs and improved quality control. Profit margins determine and control pricing policies, manufacture, marketing and distribution. Over commercialization of indigenous herbal products and drugs, and the phenomenal amount of spurious and unsafe drugs in the market.

Drug manufacturers know how to influence Doctors prescribing patterns their gains compensate the ‘free lunches’ and other perks. The patients, public and poor of the Nation are not their concern. Nurses know this but feel powerless to do anything. But are we?

⌚ Male Nurses when deployed to patrol the roads and pick up the wounded and dead for 15 days delayed their departure by arguing and resisting all day until around 4.30pm. when the writer was given the privilege to meet them. A brief discussion and prayer for each man in this stressful situation and for his wife and children, brought some tears and changed attitudes.

On return, the first reaction of these Nurses was to aggressively demand compensation. Their only defense mechanism to compensate for ‘what had made the soul sick’. How can any sum of money compensate for politically motivated discrimination of the traumatized and dying or the unwritten politically constrained errors of omission or commission in recording ‘Official Statistics’ because courage to execute the Law of truth and justice were lacking?

These male Nurses needed *time with* a Nurse Administrator who not only understood, but had the wisdom of counseling. They needed individual and group attention. Was the need of these valuable male Nurses not a priority or was the ‘busyness a cover for inadequacy’?

True strength is rooted in love and compassion.

Fear of man – Male and female, Doctors or any other Authority including the power of Ancillary and Auxiliary staff that is generally fuelled by these recognized ‘authorities’ is one of the most crippling factors in Nursing today. It robs every Nurse of quiet confidence and dignity and brings guilt grief and shame.

THE FEAR OF GOD, NOT MAN, IS THE BEGINNING OF TRUE WISDOM.

<p><i>Nurses Have Fallen</i></p> <p>Into the trap of decline through unethical immoral practices</p> <p>BUT</p> <p>We do have</p> <p>Unfailing Resources</p> <p>To claim, grasp and use to get ourselves out of the quagmire of impotence and powerlessness</p> <p>With Grace and Dignity.</p>	<p>Who really benefits from our Health Services?</p> <p>This is an ethical debate that must be grounded in action by caring Nurses.</p>	<p><i>Wake Up Call To Nurses!</i></p> <p>With an abnormally high Doctor to Nurse Ratio</p> <p>The significantly decreasing female to male population</p> <p>‘Training of ‘Quack nurses’ under the mask of empowering women</p> <p>Nurses need to waken fast to the fact that we do have</p> <p><i>The power and the authority</i></p> <p>To be part of the solution.</p> <p>To overcome and in no way continue contributing to the problem.</p>
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RELEASE

FROM THE CRIPPLING CAPTIVITY OF POWERLESSNESS

RESTS IN EACH NURSE’S WILLINGNESS:

- ✓ To recognize and accept the reality of the Government’s investment in us and consciously learn to use this invested power with skill.
- ✓ To study the Pledge we took.
- ✓ To have the courage to ask our Heavenly Father to forgive us, accept His provision for cleansing and set about living our Pledge with His enabling power.
- ✓ To take hold of the privileges given to us through the Constitution and use these as our defense in retrieving our role as Patient Advocate and true Professional Nurses.
- ✓ To heed the Prophets of old and exchange the trappings and rituals of religion for all the fullness of God’s riches from His unfailing storehouse.

REVIVED TO REVIVE

Revival in Nursing is dependent on every Nurse being revived, i.e., freshly inspired and edified, and kept in a constant state of renewal by allowing the Holy Spirit to quicken, break, melt, mould and fill us with the fullness of God's love so that we may draw on all the riches of His storehouse.

Professional revival is dependent on every Nurse being willing and committed to strengthen those who hold the responsibility to spearhead change through effective fervent prayer, practical support, action research and encouragement.

THERE IS NO NEED OR PLACE FOR BURNOUT IN NURSING

During 7 months of meeting with Nurses throughout Gujarat, I had a deep conviction and urgency to pray much for two Nurses who stand out as woman God could use in a very special way in that State.

Two women with completely different attributes. Both have a highly developed sense of Truth, Justice and Mercy with an unwavering clear commitment to build Nursing. Women with significant and substantial Nursing experience and education and with many more years to give through Nursing.

Vital gifts of strength and outspokenness in one complement the strength and quietness in the other to influence the negative powers within Nursing and the political powers at State and National level.

A vision for Nursing with the drive and willpower to persevere against great odds; coupled with a graciousness and generosity of spirit to give of themselves far beyond the call of duty, gives them a unique blend of God given qualities to inspire and encourage us all.

The State has a duty to uphold and propagate values and norms ascribed in the Constitution and Laws. Nurses are practitioners of these values and norms in the Health Services.

Eleven Lakh or more Nurses supporting and contributing to effective Nursing Leadership will be an unequalled transforming influence in the total Health Services of India. Twelve million Nurses throughout the world!

Worldwide, 12 million or more Nurses each with a fresh revelation of God's enabling power and commitment to receive and use all that is so freely given with the wisdom He supplies with it. What a mighty potential for goodness, mercy, justice, health and wholeness in the Nations of the world

We need not be grasshoppers in our own eyes or in the eyes of anyone else.

Given that the written Laws for life were first embodied in the Sacred Scriptures of the Nations of the World before the specific Constitutions and Laws of the Nations were enacted and religions became tools in the hands of the power hungry to manipulate and oppress.

Then it is hoped that the preceding reflection on facts and reality will encourage every Nurse to draw on all that is available to her/him and to share the richness of their findings with as many Nursing Colleagues as possible, to build Nursing into the unique dynamic integrated body of genuine purveyors of wholeness in life and in death that we have been called and commissioned to be.

PAUSE - THINK - STOP – ACT

Before proceeding further will you take a moment or two to pray very specifically for:

1. Yourself for wisdom, insight, courage and commitment to truth in Nursing
2. Your husband or wife and family to be enfolded in the Love of God
3. Every Nurse in your state and Country; her/his spouse and family
4. Mr. T. Dileep Kumar, Nurse Advisor to the Government of India
5. Miss. Jashu S. Patidar, Registrar of the Gujarat Nursing Council
6. Dr. (Miss.) Viru H. Bhudia, Deputy Principal College of Nursing, Ahmedabad and Pioneer of the Gujarat Nursing Research Group.
7. A revelation of God's perfect plan in Nursing through each Nurse.

CHOSEN AND EQUIPPED FOR SPECIAL SERVICE

Remember the words Jesus spoke in John 15:16

***“I chose you, that you may bring forth fruit, and that your fruit may abide;
That whatsoever you shall ask of the Father in My name, He may give it to you.”***

As Nurses in Gujarat as well as throughout India and the World take these prayer suggestions seriously and as we continue to pray for Miss. Patidar and Dr. Bhudia, we shall waken to our wonderful privilege and responsibility of having in such a promise, the keys to the Everlasting King’s storehouse, and we shall not rest until we have received bread and blessing for every Nurse and our patients//clients.

While the Law cannot save Nurses or Nursing we have an assurance for every Nurse:



“Blessed are those whose lawless deeds are forgiven...” Romans 4:7



“For not the hearers of the Law are just in the sight of God, but the doer’s of the Law will be justified. Romans 2:13



“For the gifts and calling of God are irrevocable” Romans 11:29 “



“God is not man that He should lie or the son of man that he should repent...He has been asked to bless...” Numbers 23:19-20 He will not revoke His blessing

But through personal and professional disobedience we can revoke everything He holds in store for us.

As I conclude the final editing of this paper my thoughts and prayers are with the Nurses in China where today the SARS pandemic is hitting hardest. A reported 1200 Doctors and Nurses seconded from the Military to reduce the pressure on Doctors and Nurses who are overworked and demoralized, caring for a reported 2300 not to mention their families. The photograph showed all masks correctly worn.

Contrast that with the report from Pune where the Director General of Health is referring to information now being available on Isolation procedure? Shocking but understandable, when almost every photograph of a Doctor shows him with a mask draped around his neck. That this is merely for publicity is refuted as the Doctor with a mask thus worn can be seen in any hospital corridor. The principles of isolation and asepsis have not changed. We cannot claim ignorance of the mode of transmission of organisms. Drug therapy apart all other aspects of care for the patient and the health worker are well established and have been for more than two centuries.

Principles and Laws do nothing for the health of the peoples. But Nurses and Doctors, responsible for applying the principles and laws in practice and in so doing to be true educators and purveyors of health make principles and laws live in the reality of disaster prone situations.

I am reminded of the oppressive regime in which Chinese Nurses have worked – In 1996 when in Hong Kong I had cause to ring a Nurse’s husband in China until his wife was able to do so herself – his agitation was real and it seemed to explode into the depth of my being as his voice came “I don’t want to hear you I want to hear my wife?” As soon as it was humanly possible he did hear her but what agony he had been through for two previous weeks.

In India we are not subject to such oppression. Our Constitution gives us a democratic right and responsibility to fulfill our responsibilities and execute our duties with freedom and with dignity.

Having abused this freedom, *let us redeem time and lay hold of the grace of God’s power and the power of God’s grace* to cleanse and strengthen our Health Services through a committed sanctified Nursing Profession before it is too late and Disaster Mitigation becomes a byword to our lasting shame and we join the Doctors of Surat who fled the plague. Now is the time to make our choice – opportunity not grasped is lost forever.

CHOSEN AND PRECIOUS

There is no partiality with God, every Nurse is chosen and precious in His sight.

We can in all things be more than conquerors through Him who loved us and gave Himself for us.

JUST THINK NURSE

The Age of powerless oppressed Nurses
Will be replaced by the same
Nurses transformed with a genuine un-oppressive productive power
Singing a new song of real joy and hope.

LOVE LIFTED ME

Chorus

“From sinking sand He lifted me,
With tender hand He lifted me,
From shades of night to plains of light,
O praise His name, He lifted me!”

1. “In loving kindness Jesus came
My soul in mercy to reclaim
And from the depths of sin and shame
Through Grace He lifted me... *Chorus*
2. “He called me long before I heard,
Before my sinful heart was stirred,
But when I took Him at His word,
Forgiv’n He lifted me... *Chorus*
3. “His brow was pierced with many a thorn,
His hands by cruel nails were torn,
When from my guilt and grief, forlorn,
In love He lifted me... *Chorus*.
4. “Now on a higher plane I dwell,
And with my soul I know ‘tis well,
Yet how or why, I cannot tell,
He should have lifted me... *Chorus*

