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THESE NEW CONTRAPTIONS MAY BE FINE
... but where's the patient?

Marion Snethlage, vice-president of the Alberta Association of Students, is such a person. No stranger to the world of Florence Nightingale, she spent two years in nurses' training at Foothills Hospital in Calgary before enrolling in Arts at The University of Alberta.

Miss Snethlage has recently completed a paper evaluating nursing education, excerpts from which follow this article.

An evalution by a former insider

While all students have problems in common with the nursing student, nursing is qualitatively and quantitatively worse. Therefore, while student problems in nursing are not unique, I will limit my discussion to nursing education for the sake of expediency.

Nursing education trains the students to be passive, complacent and uncreative technicians. The system does not, and simply cannot, educate students to be creative, intelligent and inquiring people. There are many reasons for this:

- 1. The financial control of nursing education, causing a dependency on the hospital for education
- 2. The curriculum itself
- 3. The heirarchical role into which the student is molded, combined with the traditional male-female relationship
- 4. The evaluation system
- 5. The preconceived idea of nursing
- 6. The nursing residence

I will now expand on each area, and attempt to substantiate the foregoing assertions.

Financial control of nursing education

Nursing education is financed by the administration of the hospital in which the students' education takes place. The primary function of the administrator is to have a balanced budget. One of the most expensive budget allotments in any organization is labor costs. It is most advantageous for the costs to be reduced as low as possible. Therefore, the administrator looks for means of reducing this figure.

As there is no legislation pertaining to nursing education, particularly in the areas of minimum wage, minimum number of working days, etc., it is natural for the administrator to look upon the student as potential labor, a labor force which does not have any restrictions on the exploitation of the student. The student is told that she is receiving a free education in return for her labor in the hospital.

The hospital authorities perpetuate the concept that the student must have 'experience' in nursing. This is true. However, as many of the two-year nursing programs have shown, 'experience' is dependent to a very large extent on the quality of the experience. In the hospital we find the student doing the drudgery which is valueless as a learning experience.

The hospital has 'shown' the student that it costs it up to \$9,000 to educate the students. These figures supposedly subtract the 'value' of her labor. However, the 'value' of the students' labor is not even calculated at minimum wage. Even in her third year, the students' labor (at one hospital in this province) is only calculated to be worth one-quarter the value of the labor of a registered nurse. This same student is left on duty, in charge, on night and evening shifts, with the responsibilities of a graduate nurse.

Through this financial control (as well as other means of oppression) the hospital administration virtually controls the student's life. On threats (verbal or implicit) of expulsion, the student is unable to have even the traditional rights of a democracy

Several years ago, a student studying in an Alberta hospital was expelled because she dared to verbalize to the press her feelings on the implementation of a forty-hour work week for student nurses.

Recently, in an Alberta hospital training school, a student in her third year was expelled because it was suddenly discovered she was an incompetent nurse. This student had only a few months before she was to obtain her diploma. She had been vocal about the working conditions within the hospital. It was after a walkout by her entire class that the hospital reconsidered and found her to be a capable nurse.

Very rarely have students been able to organize due to threats of expulsion. Thus, the hospital has a very good method for controlling students who complain too much, or who try to organize other students to disrupt the system.

Another factor which enters into it at this point is the quality of the student's education. Education of the student has not been stressed, but rather a situation of initial training to enable the student to function within the hospital takes place, followed by two years of service in return for the "privilege of a free education." This brings us to the topic of curriculum.

Curriculum

The minimum requirements for nursing education are stipulated by the Coordinating Council of the Universities Commission. The hospital administration stays as close to the minimum requirements as possible to keep their budget allotment for nursing education as low as possible.

Because of this, the nursing curriculum contains almost no classes in what are commonly known as the liberal arts. This type of education is not considered worthwhile for nursing students, as they are enrolled in a training program, which is designed to prepare them for physical nursing care.

The contradiction that exists is that the nurse is constantly told that she must care for the patient as an individual existing in an environment which places stimuli on the patient. However, it is almost impossible to deal with the problems of patients when the nurse knows almost nothing about the stresses which act upon them.

The curriculum contains very little about environmental, social or economic conditions in society. This negates any attempts to care for the total patient as an individual, instead of an "appendix" or a "gall bladder."

The curriculum in nursing causes a narrowing of the student's perception of the world. Because of the shortage of liberal subjects and the environment in which she lives, the student becomes more and more a part of her own little world, the world of the hospital with few, if any, world happenings affecting her perception of the world.

The classroom situation is almost exclusively the lecture system. Although attempts at making the student take part in her education are made, the end result is almost complete rote memorization of facts. The examinations are a complete regurgitation of these facts that the student has memorized. Few attempts are made to make the student think for herself.

Students are sometimes told they should question the facts they are taught, but when the student does so, she is told 'that's the way in which this procedure is done' or 'accept this now and



IN EVERY BED OF ROSES
. . . you find the occasional thorn

you'll see how it relates next week,' and in fact discouraged to question anything.

At the beginning of her training, the student is given classes regarding the heirarchy of the hospital. The student is taught that she is an inferior member of the nursing team and as such, has nothing to add to the care of the patient. Although she spends several hours a day with the patient, the head nurse and doctors know much better what is good for the patient.

This statement does not take into account that the patient may not fit into a slot, and has indi-

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