

GLIMPSES

Hjh. Ajimah bt. Hassan, *AMN, PPN, SRN, SCM, PHN, Dip. Community Nutrition*, takes us down memory lane and the journey she has had to take through her nursing life.

"Anyone who wishes to know oneself and to understand others has to realise that whatever we do, we are not alone". I sincerely hope that this statement keeps us reminiscing about the journey that we have to go through in life, hopefully to appreciate life experiences as a challenge and inspiration.

Why glimpses?

In case you're wondering why this article is titled glimpses, to put it simply the word glimpses means a brief view or transient appearance. And this is what I would like to share with you as I move along in life, having been in the nursing profession for the past 45 years up till now.

My initiation into nursing started on 21st September 1964 in the School of Nursing Johor Bahru, where I was stationed for 40 months. At that time, nursing education was hospital-based. Educational facilities, such as a well furnished library, lecture theatres, student mix, counselling and tutorial rooms, were not available.

To have a student population of about 40 was a boon. Though it was a small group, teamwork and comradeship was something that we treasured. And even till today we still keep in touch.

Challenging environment

However, the clinical environment in the hospital and the lack of clinical

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instructors proved to be quite a challenge. Nursing protocols were non-existent and equipment (for eg forceps and thermometers) minimal. Each item had to be accounted for and I suppose that was how we became good in keeping inventory!

Equipment had to be hand washed and we had to use the boiling method to sterilise all equipment. The night duty rituals were confined to cleaning and taking stock of equipment, including sharpening needles. We were ignorant about getting pricked accidentally by needles!

During one particular night duty stint, I discovered that one of the artery forceps was missing and I wrote it down accordingly in the chart. That proved to be my meal ticket because the night duty Sister had deliberately hid one of the artery forceps. I was too young to understand that she had done this to teach the students a lesson. Because of my innocence and honesty, I became one of the Sister's favourite students!

It was not only nursing and nurturing that we acquired in the ward, but we had to also clean bedpans and bloodstained mackintoshes. I cannot imagine our present generation doing it.

Looking back on the best

The best part of my student nursing life was looking after elderly patients. Geriatric lectures were not in our curriculum then but somehow I was drawn to elderly patients. I used to shampoo their hair, feed them and attend to their toilet needs. Upon reflection, I'm glad I did, because the insight that I acquired became useful

when I had to look after both my aged parents until their dying day. Today, when I sit back to recollect, I remember what my mother said to me when I was nursing her during her short illness, "You are not only my daughter, but you are also a nurse and mother to me."

The next phase of my nursing career was my first posting to a Health Centre in Negeri Sembilan. The Lenggeng Health Centre was considered remote and had no electricity or pipe water supply. We had to use a pump light, which we had to ignite by using spirit/alcohol. One had to acquire the technique of lighting as otherwise the spirit/alcohol would just burn without any light. The well water we had to rely on was the colour of tea! And when washing our nurse's uniform in this water it would turn from white to yellow, a touch of indigo would turn it into a shade of grey!

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Rural life

The striking memory of being posted to a health facility in the 1960s, in 1967 to be more specific, is that we were truly inadequately prepared. Lecture input for MCH was lacking and what's worse: we were not given proper orientation on site. I had to learn the ropes of working in the healthcare sector from an assistant nurse and not from my supervisor.

With all these set backs,

surprisingly, my career path was paved. I suppose, I was destined to be a public Health Nurse and I'm proud of it. I completed my midwifery training in 1968 followed by Public Health Nursing in 1970.

Being in a rural health setting was a challenge. The philosophy of the PHN.sg Curriculum, "We uphold the belief that every learner has the potential to develop into a competent Health Nurse given the right opportunities and environment", was very aptly applied here.

Deep down inside, I always remembered that the Health Nurse as a healthcare provider performs in a variety of settings that include promotion of health, prevention of diseases and disabilities and rehabilitation of the individual, family and community. The nurse provides holistic care irrespective of race, religion and status, while respecting the customs and cultures of the

various ethnic groups that constitute the "Malaysian Society" (Post Basic Course, Public Health Institute MOH, 1992).

Moving up the ladder

As I moved up the ladder in my career path, from being a PHN and Sister at the various health institutions, I did my share of educating my peers at the Public Health Institute, MOH, from 1971-1980. Since I had

Holistic care irrespective of race, religion & status

specialised in Community Nutrition, this helped me in the applied Food and Nutrition Programme of the country.

Remembering the experiences of not having documented evidences and nursing protocols I've made myself available in the formulation of PHN.sg Curriculum, Risk approach strategies in the management of maternal Health, Code of Ethics for midwives and registered nurses, to name a few.

My final destination as the Principal Matron/Registrar from 1996-2000 at the MOH, Malaysia, provided me with the opportunity to widen the scope of nursing practice

and more so to enhance nursing education and professionalism. We need good teamwork and to be able to co-exist with the other health professionals.

Current day reflections

As the number of nurses is increasing, are we preparing them to meet the world of knowledge explosion and academic challenges, without compromising quality?

I can't help but make a comparison with the current student population that has an intake of 300 to 500. This is indeed massive and a great challenge to providing adequate educational requirements

that include nursing educators and clinical instructors.

Nursing being a PRACTICE DISCIPLINE is dependent upon a high level of professionalism, ethics and human values, not forgetting intellectual and practical skills. In addition, commitments and social responsibilities have to be maintained. It is a matter of integrity.

Though my thoughts and reflections are not based on research, I'm sure we all have to face the truth. Are we producing nurses to meet the demands of today's society?

I would like to conclude that each one of us is responsible for our destiny. Make nursing our destiny. ■

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