

## TUBERCULOSIS IN THE CURRICULUM.

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When determining the place of a course of study in the nursing curriculum, there are two criteria by which we may be guided. These criteria are to be found in the *Curriculum Guide*, and are as follows:—

First, the *social value* of the experience in helping the nurse to save life, prevent disease, conserve health, and promote social well-being, and, second, the *learning value* of the experience in helping the student to learn economically and effectively the key principles, technics, points of view, etc., which she will need in studying, interpreting and meeting similar nursing situations.

It is interesting to note that in the Master List of Disease Conditions in the *Curriculum Guide*, tuberculosis is double starred. This means that this disease was considered as:

So essential from the standpoint of nursing care and experience that practice . . . should be provided for every student nurse.

There seemed to be no doubt in the minds of the compilers as to the importance of tuberculosis in the nursing curriculum.

Nurse educators are likely to find three years all too short to give student nurses experience in so many fields of medical nursing. When the desired experience is unobtainable in their own hospitals, affiliations must be sought in other organisations. This requires detailed planning; is expensive; and necessitates the absence of the student from the home school for from two months to one year.

Until recently, tuberculosis has received scant attention in schools of nursing; first, because most general hospitals have not attempted to treat tuberculosis patients, neither have they assumed any responsibility for its prevention and control; second, because of the lack of available facilities for experience in tuberculosis nursing; and, third, because nurse educators, who have not had the benefit of experience in tuberculosis, have not always recognised its importance in the public health of the community. By this same token, they also have not realised the social and learning value of this experience to the student nurse.

As a specialist in tuberculosis nursing, let me suggest how the study of tuberculosis may fulfil these two criteria in the curriculum.

In discussing the social value of experience in caring for patients with this disease to the student, let us consider tuberculosis from three points of view—epidemiological, social and economical. From an epidemiological standpoint the disease has the greatest incidence of any disease, with the possible exceptions of syphilis and gonorrhoea. It is impossible to give recent figures for the number of cases in the United States. I can, however, tell you that last year 14,876 cases of tuberculosis were reported in New York State, and allow me to emphasise that these were *new* cases and not a total of cases carried over from year to year. If such is the condition in a State which has a well-organised programme of tuberculosis control, surely these figures are at least comparable for the rest of the country as a whole.

In spite of the fact that the mortality of the disease has gone down to seventh place in the known causes of death, yet, in the age groups 15 to 35 years of age, it still remains second or third place.

There is no specific measure for preventing tuberculosis, as is the case in diphtheria, scarlet fever and smallpox. In order to control this disease we are wholly dependent on

the segregation of the positive case. While there is no "carrier" state, as found in the acute communicable diseases, there are many unrecognized cases in various stages who disseminate tubercle bacilli.

Socially and economically tuberculosis occupies one of the first places in the disorganisation of family life. It breaks up homes, separates families, destroys husband-wife and parent-child relationships; and it renders many of its victims incapable of resuming their places in society.

Economically the cost of this disease to the community is tremendous. It costs a community from \$2,000—\$5,000 to care for each case of diagnosed tuberculosis, depending upon the stage of advancement. It has its highest incidence during the most productive years of life, and the financial loss to the patient and his family amounts to more thousands of dollars. The total loss to the patient and to the community costs the country, as a whole, millions of dollars annually.

In this brief résumé, the study, at first hand, of tuberculosis and of its effects on the community would seem to be a justifiable instrument of social value to the nurse, whereby she may gain experience that "will help her to save life, prevent disease, conserve health and promote social well-being."

In considering the learning values of experience which "will help the student to learn economically and effectively the key principles, technics, points of view . . . which she will need in studying, interpreting and meeting similar nursing situations," the study of tuberculosis is necessary for the three following reasons:—

First, she will learn the technics needed in the prevention and control of tuberculosis. She should be able to adapt these to the prevention and control of other communicable diseases.

Second, she will develop a health-minded attitude, because of the necessity of teaching measures of prophylaxis and personal hygiene to her patient and his visitors. This health-minded attitude and teaching experience can be carried over to all of her nursing experience, no matter what branch of nursing she may be studying. She will learn to protect herself and, because she has learned to think in terms of health, she should be a factor in raising the health-mindedness of those around her.

Third, she will learn the skills necessary for the care of a patient with a chronic disease. She will gain an opportunity to know the social and economic backgrounds of her patients. She will have to solve the behaviour problems which arise as the result of long protracted illness. Therefore, she will learn to appreciate the importance of nursing the whole patient, so that he may gain the maximum benefit from his treatment. She will learn that the patient also has a point of view and decided opinions about his disease, and things in general. Such an experience should help her to be more interested in the patient as a person and to think of him less as just another clinical case.

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### THE FREEDOM OF THE PRESS.

On Saturday, April 11th, the National Council for Civil Liberties held an open meeting in the Central Hall, Westminster. It was crowded to the doors and the demand for freedom of the Press eloquently put forth from the platform was supported unanimously. Mr. Herbert Morrison, the Home Secretary, was strongly criticised, and his threat to use Regulation 2D to suppress a newspaper aroused a vociferous demand for its repeal.

Mr. T. L. Horabin, M.P., said that by his suppression of the *Daily Worker* and his warning to the *Daily Mirror*, Mr. Morrison had done far more to sabotage the war effort than any newspaper. The audience proved their convictions by contributing £300 in response to an appeal from the platform for financial support.

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