Nursing’s function in community health

Pushpendra Saini 1, Rahul Kumar 2, Rohit Singh Jadoun 3, Vandna 4 and Somya Gautam 4,*

1 Department of Community Health Nursing, Shree Digamber Degree College of Nursing Bharatpur, Rajasthan. India.
2 Department of Medicine, ESIC Hospital, Lucknow. U.P. India.
3 Department of Medical-Surgical Nursing, Maheshwari Nursing and Paramedical Institute, Aligarh. U.P. India.
4 Department of Obstetrics and Gynecology Maheshwari Nursing and Paramedical Institute Aligarh, U.P. India.

World Journal of Advanced Research and Reviews, 2022, 16(01), 435–438

Publication history: Received on 06 September 2022; revised on 14 October 2022; accepted on 17 October 2022

Article DOI: https://doi.org/10.30574/wjarr.2022.16.1.1025

Abstract

The availability of pre-existing PHC structures was a key indicator that most countries have the fundamental and operational basis for CHN. Nevertheless, significant deficiencies undercut CHNs’ contributions to enhancing PHC in these nations. According to the report, policymakers’ general lack of commitment and their limited ability to use the CHN-related global and regional policy tools at their disposal are the leading causes of these gaps.

Keywords: Awareness; Community; Health; Nurses; Preventive; Role

1. Introduction

Community health clinics, places of worship, homeless shelters, and schools are just a few of the sites where community health nurses provide care. They are primarily focused on addressing the demands of the general public and CHN. If properly informed, supervised, and supported, CHNs can effectively contribute to UHC by working with various community partners and healthcare providers. Numerous health issues affecting different nations’ overall health together impact communities’ health. Health service delivery structures must be put in place by policymakers to ensure a comprehensive approach to diseases like tuberculosis (TB), HIV, noncommunicable diseases (NCDs), and other illness-causing phenomena, such as environmental toxins, violence, accidents, and natural and artificial disasters. The disease burden continues to rise because shared avoidable risk factors that underlie communicable and noncommunicable diseases are not addressed. Many people’s lives—including those of nearby healthcare workers—have been threatened by emerging global health dangers, like the Ebola virus disease and Middle East Respiratory Syndrome (MERS). As an illustration, a recent report by the WHO revealed that nurses, nurse assistants, and nurse aides made up more than 50% of the Ebola infections that occurred among health workers in the Republics of Guinea, Liberia, and Sierra Leone between January 2014 and March 2015. Changing demographic trends, rising health hazards, and rising illness loads are factors in the increased demand for community health workers. These intricate and dynamic relationships show how the state of the world’s health trends drives the need for community-level interventions that promote health and prevent disease. Only if governments make sure that high-quality educational programs and policies to offer enough support for the practice of CHN are in place can CHNs significantly contribute to addressing these global health concerns.[1]

2. Overview

Given the widespread availability of multimedia through social networks, one might wonder why some preventive healthcare services, such as childhood and adult immunizations, annual screenings for men and women, and prenatal
and dental care for pregnant women and adolescents, are not provided at a 100% rate. Community awareness is a critical element of preventative healthcare, and those in charge of carrying out national health campaigns may strive to find additional crucial factors affecting community health. In a study of 190 community health nurses, nurses' cultural self-efficacy levels were high when caring for Black patients and low for Asian and Latino patients. The lowest grades were given to understanding cultural norms on authority, respect, and humility surrounding health beliefs and behaviours. Scores increased when interpreters were used successfully to convey critical messages. Researchers concluded that nurses lacked confidence when caring for patients from various cultural backgrounds and found deficiencies in the nursing curriculum that left nurses inadequately prepared to care for multiple demographic groups. Most countries, including Iran, have government organizations with the resources and personnel to carry out preplanned initiatives and provide community-based preventive healthcare services to deal with most preventable health-related issues through satellite clinics, health departments, and outpatient facilities. Urban and suburban populations can still access treatment-based services from the metropolitan areas' private sectors. Because there is minimal access to multimedia, few healthcare experts are ready to work in outreach sites, and muddy roads make it difficult for locals and visitors to get around quickly; primary care and preventive health services should be concentrated in remote and rural areas. To develop a successful community-based preventive programme and explain how societies deal with adversity, it is essential to recognize resilience as a theoretical framework within that society. In a British study, nurses considerably reduced the primary cardiovascular disease risk factors in middle-aged patients, highlighting the importance of the nursing profession in preventive health. Compared to other healthcare professionals, nurses in a primary care setting might give health checks and record blood pressure twice as often, smoking behaviours four times more frequently, and weight-related issues five times more frequently. The community health nursing paradigm steers clear of overly generalized aggregates. It tackles collective concepts of nursing domains to address environmental, resilient, and community capacity for healthcare difficulties across varied populations. To help rural community health nursing programmes in urban and rural communities execute preventative measures for residents' health and wellbeing, conceptual frameworks are offered. 1,4 With this knowledge, Iranian nurses in any practice area will find a perfect opportunity to inspire, motivate, educate, and advise the public to consider health screening, yearly check-ups, children and adult immunizations, and provide health education to patients across the lifespan. A clinical environment or hospital is not where nursing practice begins or ends. It’s essential to remember that the phrase "Once a Nurse, always a Nurse" refers to the fact that a nurse can always provide the public with guidance and instruction since medicine CANNOT. [2]

Whether the government or the private sector is funding the programme, nurses are essential to its implementation. Without a doubt, nurses are critical to society's progress in terms of health and wellness. If Iranian nurses wish to have a long-lasting effect on the nation's wellbeing, they must take this duty more seriously. [3]

To promote health, prevent sickness, care for the ill at home, and encourage rehabilitation, licensed nurses give services to the general public, groups, families, and individuals at home, in health centres, clinics, schools, and places of employment. Unlike most nurses who concentrate on one patient at a time, public health nurses care for entire communities execute preventative measures for residents' health and wellbeing, making the function of the public health nurse particularly vital. [4]

**Table 1** The objectives of the public health nurse

| Objective                                                                 |
|---------------------------------------------------------------------------|
| Participate in the development of a community health plan                   |
| To provide the populace with top-notch nursing care                        |
| Plan nursing services involving various medical personnel.                 |
| To engage in or conduct community health-related research                  |

It should be a mission-driven strategy that emphasizes preserving positive relationships between the community and the health team, health promotion activities, especially those that target lifestyle diseases, a focus on smart eating, and health protection by preventing illness or changing the course of disease through reasonable measures like immunization and exclusive breastfeeding, among other things. She must also make sure that one of the cornerstones of primary healthcare is kept, which is the equitable distribution of health services without discrimination between the rich and the poor, rural and urban, male and female, etc. She has been essential to the community’s health, especially when medical personnel are not available due to certain constraints, which is a problem that commonly occurs in rural India. She has the power to reduce the neighbourhood’s infant and maternal mortality rates drastically. The infant mortality rate has been cited as the most reliable indicator of a nation’s, state’s, or community’s level of health. She might be able to stop these deaths by swiftly directing patients to higher centres. She should focus more on registering
expectant mothers for antenatal checks (ANC) and offering essential health services with the help of an accredited social health activist (ASHA), a volunteer health worker employed by the National Health Mission. She needs consistent orientation for this. Sickness is not a random occurrence; it can be concluded. Only medical experts, such as public health nurses, thoroughly understand the diverse sociocultural, economic, environmental, and genetic factors that influence community health. Mothers and children should give special attention to understanding and resolving their concerns because they are a demographic that is substantially more at risk. Enhancing the health of at-risk populations, such as mothers, children, and other vulnerable groups, is the responsibility of a community health nurse. If houses are healthy, society and the country will also be beneficial. [5,6,7]

Table 2 The public health ideas outlined below support these objectives

| Taking into account the known needs of the families, people, and communities |
| --- |
| Family is the cornerstone of the organization. |
| Offering unbiased services to everyone. |
| A public health nurse's primary responsibility is to inform the public about health issues. Utilizing resources wisely is among the other duties. |
| Recording and reporting actions and occurrences relevant to health |
| We are giving priority to illness prevention and health promotion over medical care. |
| We are incorporating organizational and management principles into the delivery of healthcare. |

3. Conclusion

Nurses play a vital role in implementing any universal health care program, whether the government or the private sector sponsors it. Unquestionably, nurses play a critical part in society's improvement of health and well-being, and Indian nurses need to take this responsibility more seriously if they want to have a long-lasting impact on the general welfare.

Compliance with ethical standards

Disclosure of conflict of interest

There are no conflicts of interest declared by the authors

Statement of ethical approval

This evaluation does not require ethical approval because no patient data will be collected. Plagiarism, confidentiality, malfeasance, data falsification and/or falsification, double publishing and/or submission, and duplication are among the ethical problems examined in this study.

Funding

There was no outside support for this study.

References

[1] World Health Organization. (2017). Enhancing the role of community health nursing for universal health coverage.
[2] Fooladi, M. M. (2015). The role of nurses in community awareness and preventive health. International journal of community-based nursing and midwifery, 3(4), 328.
[3] Bernal H, Froman R. The Confidence of Community Health Nurses in Caring for Ethnically Diverse Populations. Image J Nurs Sch. 1987; 19:201–3. [PubMed] [Google Scholar]
[4] Kulig JC, Edge D, Joyce B. Understanding Community Resiliency in Rural Communities through Multimethod Research. Journal of Rural and Community Development. 2008; 3:77–94. [Google Scholar]
[5] Fullard E, Fowler G, Gray M. Promoting prevention in primary care: controlled trial of low technology, low-cost approach. Br Med J (Clin Res Ed) 1987; 294:1080–2. [PMC free article] [PubMed] [Google Scholar]

[6] Grumbach K, Miller J, Mertz E, Finocchio L. How much public health in public health nursing practice? Public Health Nurs. 2004; 21(3):266-76.4.

[7] Kemp LA, Harris E, Comino EJ. Changes in community nursing in Australia: 1995-2000. J Adv Nurs. 2005; 49(3):307-14.5. McMurray R, Che (3) (PDF) Nurses Role in the Community. Available from: https://www.researchgate.net/publication/270653274_Nurses_Role_in_the_Community [accessed Oct 02 2022].