

1890's



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1920's



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1940's



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1950's



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NURSES THROUGH THE AGES

Nurses & Needles

Whether it is the provision of sterile injecting equipment or addressing the primary care needs of clients, nurses and other staff with nursing backgrounds are a significant part of the Needle and Syringe Program (NSP) workforce in Australia. They work in a range of settings - hospitals, community health and sexual health programs - and add to the skills and knowledge base of the sector.

'Nurses have an image in society that is about being non-judgmental and caring. This is especially important for clients who are using drugs. They are often judged and consequently don't seek help. The nurse at the NSP can be the first port of call in engaging with clients about improving their health,' says Colette McGrath.

'Nurses can make a difference,' Colette continues. 'We should be interventionist. We are health professionals with a responsibility to seize whatever opportunity presents itself to engage people about their health and if they are injecting, that they are doing it as safely as they can.'

Merri Blair agrees. 'Nurses have knowledge that they can draw on quickly in the brief interactions that characterise NSPs. For example, I was talking to someone the other day and the subject of "backwashing" came up. I was able to educate that person about blood clots in the needle and syringe and the risks for endocarditis and deep vein thrombosis. It's knowledge that I have from my nursing background. Of course people think that endocarditis won't happen to them, but you'd be surprised how quickly it could develop,' Merri explained.

Most nurses who provide NSP services do so as part of a range of other responsibilities. Some work under enormous pressure that limits the time that they can spend with NSP clients. According to Colette, however, 'Even a brief interaction can be educational and rewarding. It can be very basic, such as "Hello, have you had anything to eat today?" A kind word can have a positive effect.

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The New Nurse

Essentially, nurses humanise an increasingly complex and technical health care system,' says Elizabeth Foley, the director of policy at the Royal College of Nursing, Australia.

Nursing represents the largest proportion of Australia's health professional workforce and Australian nurses are regarded by some as being the most highly educated in the world. However, increased complexity of patient needs and the Australian health care system are placing additional pressures on nurses.

'Nurses increasingly have to care for individuals who present with multiple issues. On occasions these issues include multiple acute and chronic physical problems, mental health issues and drug and alcohol-related behaviours. As the primary carer for the patient a nurse is required to coordinate the care management all of these problems,' says Lyn Lang, the deputy head of the School of Nursing and Midwifery at the Albury-Wodonga Campus and chair of the school's Teaching and Learning Committee at La Trobe University.

Elizabeth notes that 'Nurses are seeing mental health issues and violence arising from the use of licit and illicit drugs. Nurses who are not specifically trained in the areas of drug and alcohol or mental health do not necessarily have skills to deal with these types of issues. While they might be more aware of these issues that affect their clients, if they do not have the resources

or specific skills to manage these clients appropriately then it becomes an issue. This is a particular concern for nurses in rural and remote settings where they are typically under-resourced.'

Elizabeth identifies two other factors that have contributed to the new challenge for nursing. 'Firstly, the improved technology for all

areas of society: this has perhaps had a greater impact on the health sector than on any other industry. This has led to more advanced and more complex surgical procedures, diagnostic procedures, treatments and medication regimes which nurses have to constantly adjust to. Secondly, shortened stays in the acute setting have led to more complex issues needing to be cared for in the community setting,' she says.

In considering how well equipped today's nurses are to handle the increased complexity of their role and clients, Elizabeth thinks that 'Nurses today have a better knowledge of public health, therefore

they are better equipped to understand the broader issues affecting the community, such as drug use.'

In response to changing needs and demands, nursing education has also broadened its focus. No longer is there a focus only on the clinical treatment for a specific health problem. Nursing education has increasingly adopted a holistic perspective and is more oriented towards a model of health care that acknowledges the physiological, psychological and social factors that impact on health.

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PREGNANCY, DRUGS AND MOTHERHOOD

Drug use during pregnancy and motherhood is controversial. Women who are pregnant and use drugs, or who are drug-dependent, are often subject to a great deal of scrutiny and stigma. Strong societal views about what it means to be 'a good mother' impact on a woman's sense of self during her pregnancy and her perceptions of herself as a mother. What can NSPs do?... p6

Nurses in NSPs

Nurses who provide and are involved with NSP services across Australia share their insights on the challenges and rewards of providing quality health care... p2

NURSES AND DRUGS

Drug and alcohol use occurs across the whole community. Nurses cannot assume that their patients are not using drugs. In some sections of the health care system, drug issues are particularly pertinent. What role do nurses play in these areas? p10

Nursing NSP clients

The complexities of providing nursing services to NSP clients are explored in these case studies... p9