Nurses as the Leading Voices: Health is a Human Right

Fatemeh Bahramnezhad¹, Parvaneh Asgari²*

1- Assistant professor, Department of Critical Care Nursing, School of Nursing and Midwifery, Tehran University of Medical Sciences, Tehran, Iran.
2- PhD Candidate, Department of Critical Care Nursing, School of Nursing and Midwifery, Tehran University of Medical Sciences, Tehran, Iran.

*Corresponding Author: Parvaneh Asgari, Tel: 02166927171, Email: p-asgari@razi.tums.ac.ir.

Received date: 23 Apr 2019 Accepted date: 20 May 2019

Letter to Editor
As the most important part of the health system employing a comprehensive health approach, nurses significantly affect the effectiveness of the healthcare system and play an important role in the promotion of health, prevention of diseases and treatment and care (1). This issue is in favor of individuals, societies, and populations in the healthcare center. The importance of the role of nurses in investments of the healthcare area and improvement of economic growth of communities is undeniable (2). One of the most crucial issues in the move toward social justice and equality in the healthcare systems of countries is simple and constant access of societies to the required healthcare services (3). Access to timely use of services is personalized based on the requirements of individuals. Equality in access to health services is defined as receiving healthcare services required by individuals based on their health problems (4). On the other hand, access means the fit between several factors, such as the ability to pay the cost, access to services that are often provided physically, accessibility, admissibility, which is often recognized as culture accessibility, and matching of services with needs (5). In achieving services, these five factors act as a chain, meaning that the improvement of only one of them will not necessarily lead to the enhancement of the level of access and fair provision of healthcare services (6). Justice in access to services can be established through the formation or improvement of primary care centers and advancement of public coverage. As the primary health care providers, nurses provide effective care and positive health outcomes, such as decreased costs and shorter hospital stay. The public health coverage is access to the main health interventions, including improvement, prediction, treatment, and rehabilitation at an affordable level of cost (7). In fact, society-centered and public-based care results in the improvement of treatment care and increased satisfaction of families (8). Today, nurses are trained for clinical services in Iran, in a way that they are forced to directly refer to the second and third levels of the service provision system to receive services by spending time and money.

In addition, lack of knowledge of nursing abilities reduces the presence of nurses in healthcare providing centers at the society’s level, and the majority of authorities focus on the second level of prevention, which is clinical care in hospitals. Therefore, care provided by nurses is very limited at other prediction levels and service-providing environments in society. While community health nurses are trained at a higher education level, most of them carry out clinical work in hospitals. Meanwhile, nurses are one of the strongest providers of primary health care at the society level in advanced countries, which leads to switching the role of nurses from hospitals to society (9). Furthermore, therapists play an important role in the diagnosis, treatment and education of nurses in most countries, such as the United States, England, Australia, and Colombia.

Copyright © 2019 the Author(s). Published by Kurdistan University of Medical Sciences. This is an open access article distributed under the terms of the Creative Commons Attribution-Non Commercial License 4.0 (CCBY-NC), where it is permissible to download, share, remix, transform, and buildup the work provided it is properly cited. The work cannot be used commercially without permission from the journal.
In addition to hospitals, these nurses can be employed for in-home visits and sometimes for rural and remote regions (nursing based on the community’s need). The presence of these nurses leads to simple and quicker access of patients to healthcare services, reduced costs and waiting time and increased satisfaction of these individuals. In addition, these nurses are valuable to patients and are trusted by these people (10). This issue improves the public image of nurses in the society, develops the role of nurses and decreases the costs, which overall improves the provision of healthcare services in remote and rural regions. Given the fact that nurses are not allowed to legally prescribe medications even at the PhD level, there are some challenges in educational, research and cultural-social aspects of this issue, which require fundamental changes in healthcare policy-making and education of students (11). According to the mentioned issues, it seems that nurses play an insignificant role in the improvement of access to healthcare services. Therefore, the following items are proposed to improve the position of nurses in this area:
- Precise estimation of workforce, equipment, and facilities of centers based on the demand of the covered population to increase access of more people of the region to the related services
- Improvement of the public image to trust and accept nursing services by the society through promoting the inner belief of nurses, increasing their presence in scientific gatherings and healthcare organizations and active interactions with the media to attain a positive professional identity and enhance the public belief to accept nursing services
- Specialization in nursing and development of the role of nurses to lay the proper foundation for solving legal and educational issues so that the legal authority of nurses could be increased and eligible nurses could be employed as nurse therapists
- Education of community-oriented nursing through the provision of periodic educational programs for clinical nurses and laying a foundation for education and work of nurses in the society. In addition, education of students since entering the university is a solution to realize this goal. Review of the curricula based on SPICES is one of the most valid strategies in the modern educational system, one of the principles aspects of which is community orientation.

Keywords: Nurse, Health, Human Right
برهان صدای پیشرو: سلامت یک حق انسانی است

فاطمه بهرام‌نژاد

1- استاد، دانشکده پرستاری و ماما، دانشگاه علوم پزشکی تهران، تهران، ایران
2- دانشجوی دکترای پرستاری، دانشکده پرستاری و ماما، دانشگاه علوم پزشکی تهران، ایران

نوبت‌نامه مسئول: پروانه عسگری، دانشگاه علوم پزشکی تهران، تهران، ایران
پیام‌رسان: p-asgari@razi.tums.ac.ir

خاطره نمایندگان و خانواده‌های از آنها برای مراقبت‌های پیشگیری، درمان و توانبخشی در سطح‌های مختلف سلامت، بهبود و بهبود تعیین ارزش‌های جامعه محور و مبتنی بر مردم، با توجه به ارزش‌هایی که به آنها ارائه شده‌اند، سلامتی و سلامت محوریت نشان داده می‌شود.

در ایران، پرستاران برای خدمات بالینی تربیت می‌شوند. با توجه به اینکه تعداد پرستاران در سطح دوم و سوم نظام ارائه خدمات بالینی محدود است، باید روش‌های جدیدی برای ارائه خدمات بالینی به مردم پدیدار باشد.

پرستاران صدای پیشرو: سلامت یک حق انسانی است
این در حالی است که در کشورهای پیشرفته پرستار یکی از قویترین حامیان مراقبت‌های بهداشتی اولیه در سطح جامعه است که سبب می‌شود، نشان پرستاران از پیام‌رسانی به جامعه سوخت داده شود (9). علاوه بر آن در سیاست‌های کشورها، نظر امریکا، انگلیس، استرالیا، کلمبیا پرستار درمان‌گران نقش مهمی در تشخیص، درمان و آموزش بیماران دارند. از این پرستاران علوهو بیمارستان، در ویزیت منزل و گاه مناطق دورافتاده و روستایی (پرستاری مبتنی بر نیاز جامعه) استفاده می‌شود. حضور آنها موجب دسترسی به خدمات بهداشتی درمانی، کاهش هزینه‌های پرداختی و زمان انتظار آنها و افزایش رضایت بیماران می‌گردد. آنها برای بیماران ارزشمند بوده و مورد اعتقاد عموم است (10).

امروز سبب بهبود تصویر عمومی از پرستاران در جامعه، توسیع نقش پرستاران و هزینه ارتقای تر کردن سیستم‌های مراقبت بهداشتی خصوصاً در مناطق دورافتاده و روستایی می‌گردد. در ایران پرستاران در مقابل زیادی نیز اجازه تجویز قانونی نداخند و در این زمینه بالای‌هایی در سیستم آموزشی، پژوهشی، فرهنگی اجتماعی وجود دارد که نیازمند تغییرات اساسی در سیستم‌سازی نظام سلامت و آموزش دانشجویان دارد (11).

با توجه به مطالعات فوق به نظر می‌رسد پرستاران در ایران در بهبود دسترسی به خدمات بهداشتی درمانی کمک می‌کنند. لذا جهت بهبود و مناسب‌سازی چالش‌ها ضروری است که بهبود می‌گردد:

- برآورد دقیق نیازهای انسانی، تجهیزات و امکانات مراکز نسبت به نیازهای جمعیت تحت پوشش جهت دسترسی بهتر ممکن کند.

- بهبود تصویر عمومی بهبود امکانات پرستاری از سوی جهت از طریق تقویت باورداری و تحسین خدمات پرستاری از سوی جهت از مجامع علمی و سازمان‌های مراقبت بهداشتی و تعامل فعال با رسانه‌ها جهت سیاست‌های بهبود جهت پذیرش خدمات پرستاری.

- تخصصسازی سازمانی در پرستاری و توسیع نقش پرستاران با ایجاد بستر مناسب و حل مشکلات قانونی و آموزشی جهت افزایش اختیارات قانونی پرستاران و به کار گیری پرستاران واجد شرایط، به عنوان پرستار درمان‌گران.

- آموزش پرستاران بستری نگه داشتن بهبود نگه‌داری پرستاران بستری در جامعه و ایجاد بستر مناسب و حل مشکلات قانونی و آموزشی SPICES

- راهکارهای موجود جهت تحقیق این اهداف به پدیدار کردن یک سیستم آموزشی جامعه محوری پرستاران و ایجاد یک جامعه محوری پرستاران و ایجاد آن است.

واژه‌های کلیدی: پرستار، سلامت، حق انسانی

References


