

FOREWORD

Few will disagree that there are many unsolved problems in nursing education in South Africa and many of these can be directly related to the system of nursing education.

As far back as the end of the last century, Sister Henrietta Stockdale advocated that nursing education should be part of the national educational system to ensure that nurses are educated to meet national instead of local needs. University education for nurses was propagated by the South African Trained Nurses Association since 1915.

Historical heritage and events prevented the development of an educationally sound system of nursing education. Hospital authorities would begin to train nurses to meet staffing needs and nursing education thus became a by-product of hospital service. It was "service for education" instead of "education for service", and totally isolated from the mainstream of education.

Despite many memorandums, documents, motivations and negotiations by both the South African Nursing Association and the South African Nursing Council since 1944 the situation has remained almost the same, university nursing courses excepted. When nursing colleges were established control remained in the hands of the service organisation — the matron of the hospital, whose duty it is to put the interests of the patients first, is in charge of and responsible for the nurse training programmes. Because nursing education has not been made the statutory responsibility of any particular authority it is also still undertaken as a staff development function of training hospitals.

Although we cringe at the thought, is it surprising that the public refer to nursing education as apprenticeship training, in-service education, inferior education (for which no recognition — academically or otherwise is given) and a course to which the less bright secondary school leavers should be directed?

An educational system is required:

- in which nursing education will be part of the mainstream of tertiary education affording diplomas in nursing the recognition they deserve as full tertiary professional qualifications
- in which the control over nursing service and nursing education are separated and in which students can truly be learners and not the major work-force in the service (this does not require that the student does less clinical practica, but that cognisance is taken of her educational level and learning needs)
- in which the comprehensive needs of the community are met, and not only the localised needs of the service organisation.

VOORWOORD

Daar is min mense wat sal ontken dat daar talle onopgeloste probleme op die gebied van verpleegonderwys in Suid-Afrika is, en baie van hulle hou verband met die stelsel van verpleegonderwys.

Reeds teen die einde van die vorige eeu het Suster Henrietta Stockdale aanbeveel dat verpleegonderwys deel van die nasionale onderwysstelsel moet wees ten einde te verseker dat verpleegkundiges opgelei word om in lands- in plaas van plaaslike behoeftes te voorseen. Van 1915 af het die Suid-Afrikaanse Vereniging vir Opgeleide Verpleegsters universiteitsopleiding vir verpleegsters propageer.

Die geskiedkundige agtergrond en gebeure het die ontwikkeling van 'n opvoedkundig gesonde verpleegonderwysstelsel verhinder. Hospitaalowerhede het verpleegsters begin oplei om in die personeelbehoeftes te voorsien en op die manier het verpleegonderwys 'n neweproduk van die hospitaaldiens geword. Dit was "diens vir opleiding" in plaas van "opleiding vir diens" en heeltemal van die hoofstroom van onderwys afgesonder.

Ten spyte van talle memoranda, dokumente, motiverings en onderhandelings deur die Suid-Afrikaanse Verpleegstersvereniging en die Suid-Afrikaanse Raad op Verpleging sedert 1944 het die toestand ongeveer dieselfde gebly, universiteitskursusse in verpleegkunde uitgesluit. Toe verpleegkolleges gestig is, het die beheer in die hande van die diensorganisasie gebly, met die matrone van die hospitaal, wat eerstens na die belang van die pasiënte moet omsien, in beheer van en verantwoordelik vir die verpleegopleidingsprogram. Omdat statutêre verantwoordelikheid vir verpleegonderwys geen bepaalde owerheid opgelê is nie, word dit nog as 'n personeelontwikkelingsfunksie van opleidingshospitale uitgevoer.

Hoewel ons krimp by die gedagte, is dit verbasend dat die publiek verwys na verpleegonderwys as vakleerlingopleiding, indiensopleiding, minderwaardige onderrig (wat geen erkenning — akademies of andersins — kry nie) en 'n kursus waarheen minder knap sekondêre skoolverlaters verwys moet word?

Daar is 'n onderwysstelsel nodig:

- waarin verpleegonderwys deel van die hoofstroom van tersiêre onderwys sal vorm en diplomas in verpleegkunde die erkenning van volle tersiêre professionele kwalifikasies sal kry wat hulle verdien
- waarin die beheer oor verpleegdiens en verpleegopleiding geskei sal word en studente werklik *studente* en nie die belangrikste werkrag in die diens sal wees nie (wat nie beteken dat die student minder kliniese praktika doen nie, maar dat kennis geneem word van haar onderwyspeil en kennisbehoeftes)
- waarin daar in die omvattende behoeftes van die gemeenskap en nie net in die plaaslike behoeftes van die diensorganisasie voorsien word nie.

Die pad is nou oopgemaak vir so 'n stelsel. Op 30

The way has now been opened for such a system. On 30 April 1982 the negotiations of almost 40 years, culminated in an announcement by the Minister of Health and Welfare that affiliation of nursing colleges to universities had been approved. Colleges will become autonomous and will benefit especially from the human and other resources of the university to which it is affiliated. Students will receive diplomas from the particular college, endorsed by the university which will monitor educational standards and examinations thus giving an academic hall-mark to nursing education.

Much work is now needed to reach the goal of an educationally sound system of nursing education of which future generations will certainly reap the benefits. We all know the demands of modern nursing and every nurse who believes that the service rendered by her profession is essential to meet the needs of the community, should give her full co-operation to this exciting new development.

April 1982 het die onderhandelings van byna 40 jaar die hoogtepunt bereik toe die Minister van Gesondheid en Welsyn aangekondig het dat die affiliasie van verpleegkolleges met universiteite goedgekeur is. Die kolleges sal selfstandig word en sal veral by die mensemateriaal en ander bronne van die universiteit waarmee hulle geaffilieer is, baat. Studente sal diplomas van die bepaalde kollege ontvang wat geëndosseer is deur die universiteit wat kontrole uitoefen oor die standaard van opleiding en eksaminering, waardeur verpleegonderwys dus 'n akademiese waарmerk sal kry.

Daar lê nou baie werk voor om die doel van 'n opvoedkundige gesonde verpleegonderwysstelsel — waarvan toekomstige geslagte beslis die vrugte sal pluk — te bereik. Ons weet almal watter eise die hedendaagse verpleging stel en elke verpleegster wat glo dat die diens wat haar beroep verskaf noodsaklik vir die vereistes van die gemeenskap is, behoort haar volle samewerking aan hierdie opwindende nuwe ontwikkeling te gee.