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Neonatal Nursing in Nepal

The nursing care in Nepal is general; it has not been specialized very much. Until recently, there was only one nursing college offering a degree of Bachelor of Nursing. Now, there are five other colleges but they all offer the same specialties: hospital and community. There are plans to commence a Bachelor of Midwifery in the future.

Nepal has only one institution that offers a Master of Nursing program; the Tribhuvan University. The program began in 1995. At first it offered the Master of Nursing in Women's Health and Development and four students enrolled. Later, the quota was increased and currently up to 14 students can be accepted into the program. The specialty areas on offer are adult nursing, paediatric nursing, and women's health and development. Paediatric nursing and women's health covers some of the neonatal nursing concepts but not in detail.

Some Nepalese nurses are trained in neonatal nursing in Japan, undertaking a nine month neonatal training program, but only one of these nurses has been able to practice in the neonatal care setting because of the Government's transfer system. There is no system of allocating manpower to a particular clinical area. Unfortunately, decisions regarding allocation of staff to a particular area of need are based on bribery or power. Some nurses are educated in foreign countries such as India, Bangladesh, Ireland, Finland, UK, and Australia, but once they return home they don't resume their practice in their area of interest; they are involved in other areas.

The concept of specialty in nursing is not yet well developed in Nepal. There are nurses specialized in cardiovascular care, cancer etc. however; they are replaced by general nurses. So far, there is only one Neonatal Intensive Care trained nurse in the Kingdom of Nepal, and she is practicing as a general nurse.

Neonatal Health Services in Nepal

There is one tertiary level Children's Hospital in Kathmandu with a Special Care Baby Unit (called a Neonatal Intermediate Care Unit) and a Neonatal Intensive Care Unit. The SCBU has 31 cots and the NICU has eight (four warmers and four incubators). There is also a Surgical Intensive Care Unit with four beds, which is for all children undergoing surgery and requiring post-operative care. There is no provision of a specialized neonatal surgery unit.

We have no system of retrieval in Nepal; doctors refer sick babies to this hospital, the only referral hospital of the country. There is one Maternity Hospital in Nepal, but it has a SCBU only. There are two private sector operated baby units but they are unable to be accessed by poor people; and there are about three SCBUs at countryside hospitals: Pokhara, Butwal and Biratnagar but they do not staff trained professionals. These facilities are unable to reduce the high neonatal and infant mortality rate: 39 deaths per 1000 live births and 64 deaths per 1000 live births (DHS 2001) respectively.

It has been clear that the government has been careless. The available human resources have not been utilized appropriately, and there are no plans to adopt new advances in neonatal care except the conventional ventilators. There is no system of formal evaluation of any implemented programmes (preventive measures launched by Child Health Division at Department of Health Services). The committee of policy makers is made up of non-medical persons, who have traditional and old fashioned concepts of healthcare in mind. Nurses are not represented at this level at all.

Due to vast geographical differences (8848m to 60m from the sea level) it has been difficult to reach health services in Nepal. However, efforts should be made to address the health needs of all people including those residing in remote villages, who are unaware of health care facilities within their reach.

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