Community Nursing in Australia
Debbie Kralik and Antonia van Loon
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Kralik and van Loon’s text provides a thorough overview about community nursing in Australia. It is generally well written and presented, providing a nice introductory and theoretical text to its more detailed and practical companion manual by Kralik et al. (2008).

This anthology consists of 24 chapters. Whilst these are not grouped, they do have a general order beginning with the historical and political context of modern community nursing in Australia (Chapters 1 to 4), continuing with current practical issues (Chapters 5 to 8) and dealing with specific groups (Chapters 9 to 19), and ending with views of some current issues (Chapters 20 to 24). The authors are almost all nurses, and are working in a variety of practice, education and research roles.

It is a wide-ranging text that perhaps justifies its cost. Given the number of chapters, one might expect that some might be worthier than others to critique but this is not the case, as most chapters are of high quality. It is, of course, not possible to review all the varied contents of each chapter – or the review would be as significant as the book itself. We selected several chapters that were personal favourite topics.

The first chapter, an important and fascinating chapter for those first considering community nursing, presents the somewhat contentious historical development of community nursing via ‘handywomen’ and ‘midwives’, religious nurses, the district nursing schemes, bush nursing, inland mission nurses, the Reverend Dr John Flynn’s ‘Flying Doctor Service’ and, given contemporary increasing home nursing demands, presents an ongoing positive future trend for community nursing. Sadly it lacks some detail – for example there are very few specific years given for many of the developments, and curiously, as there is an excellent chapter devoted to them later in the book, for some reason maternal and child health nurses are missing from this synopsis. Also missing is the evolution of the ‘Health For All’ principles into the Millennium Development Goals, and the revisiting of Primary Health Care in the WHO World Health Reports, especially 2008 Now More Than Ever.

Crock’s chapter (Chap. 6) examines ethical issues in community nursing. This chapter is valuable as it does NOT make the assumption that readers (and even nurses) have been appropriately trained in ethics – particularly bioethics. Listing the key bioethical principles (autonomy, beneficence, nonmaleficence and justice), the author then explores human rights theory, codes of ethics and other guidelines, ethical decision-making processes and ethical issues specifically for community nursing (namely professional boundaries, privacy and confidentiality, informed consent, IT and ethics and political action and ethics). There are one or two irritations; for example, it is sad to see the usual misinterpretation of the law surrounding immunisation and school exclusion presented here so inaccurately. However the chapter provides several case studies as examples, which are very helpful for those unfamiliar with ethical issues. Hopefully this chapter will not only help community nurses to think critically but also think systematically through each issue they face.

‘Risky Business’ is the subject of Chapter 8 (Anne Maddock), and is a good abstract synopsis of risk theory but does not include some important risks, for example personal risk to nurses as a result of patient contact or as a result of work-related travel, other than that presented in a case scenario.

Chapter 9 (Kralik and van Loon) explores ways the community nurse can support and effectively work with people to facilitate their transition through life changing events such as experiencing chronic illness. Rather than writing a long-winded description, the authors have produced a very helpful systematic and succinct transition model based on years of action learning research, which helped to indentify four phases of transition that many people proceed through, namely: (i) familiar life, (ii) ending (of familiar life), (iii) limbo, and finally (iv) becoming ordinary (coherent re-living). This chapter provides a useful chapter detailing components of this transition process. The community nurse’s role, state the authors, is to use the ‘look, think and act’ process to help the chronic patient to ‘locate a sense of coherent and continuous self in a changing world’.

Chapter 11 (June Cioffi) about community nursing in diverse populations and Chapter 12 (Karen Francis and Ysanne Chapman) on rural and remote area nursing both missed an opportunity to better link this kind of work with the principles of primary health care. It is sad that despite lip service being paid to primary health care, these and most other chapters appear to assume that health professionals are the lynchpins of health delivery. And this sentence is completely baffling:

‘Cultural competence for Australian nurses is important but the limitations of a culturalist approach may necessitate a pluralist approach that locates multiple factors in the social and economic dimensions’.

I understand every word, but what on earth is the author actually trying to say?

Infection control (Ramon Shaban) is the subject of Chapter 15, reproducing some useful guidelines yet it is generally thin on practical application detail. For example, there has been a new disease identified in the world every year for about the last 30 years, but these are missing. The list
of outbreaks in Australia has four examples between 1997 and 2000 but the original references missing and the examples are taken from a summary article. And the 2000 world-famous Melbourne Aquarium outbreak of Legionellosis is not listed as one of them! Actually, there are dozens of interesting outbreaks in Australia every year. A global spotlight is directed on Avian influenza, SARS, and bioterrorism, but not the much more important and prolonged global outbreak of cholera; plague and anthrax outbreaks happen every year but not in this book. TB? Missing. These are important points; in Australia we are not isolated from the rest of the world. Travel, another aspect of life, happens – even among community-nursed patients and their families.

Chapter 16 (Gay Edgecombe) on Maternal and Child Health is thoughtful and well written, and contains many definitions that could be used elsewhere in this book. O’Connor’s chapter (Chap. 19), which addresses palliative care in the community, provides a succinct definition and historical overview elaborating upon the inclusive approach of health promoting palliative care, modern palliative care policy and the three agreed goals of the Palliative Care Intergovernmental Forum (namely (i) awareness and understanding, (ii) quality and effectiveness, and (iii) partnership in care). It notes the Commonwealth Government’s National Palliative Care Strategy supporting the Palliative Care Australia organisation in its important historical reference to early religious influences, the book lacks any substantial notation to the community nurse’s holistic role of providing or even organising spiritual and or pastoral care, nor does it clarify the ongoing contribution and possible teamwork role that community nurses should have with regard to community clergy, health care chaplains or non-ordained pastoral care workers. In our opinion this is a serious omission, particularly given the community nurse’s role in caring for a growing number of older people and those in palliative care who will seek to have spiritual and faith issues addressed.

Nevertheless this book is a good introductory resource for conceptualising, understanding and accounting for the important role of the community nurse in Australia. We recommend it as a companion to its sister text by Debbie Kralik, Katherine Trowbridge and Judy Smith (2008) titled A Practice Manual for Community Nursing in Australia (Oxford, Blackwell Publishing), also reviewed in this journal.

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