To Ride or Not to Ride?

It is a dream of a teenager to drive a powered two wheeler (PTW). Admission to junior college (class XI) seems to provide such an opportunity. Many parents feel obliged to buy a gearless two wheeler for their wards after their successful completion of class X. While majority buy one without hesitation, riding a PTW poses risk to health and safety of young adolescents. As per the Motor Vehicle Act 1988, it is illegal for underage to drive a vehicle and the owner and/or the parent is liable for fine and imprisonment [1].

A teenager is more prone to road traffic accidents due to adrenaline surges. Traffic congestion, wrong side driving, lane cutting and violating traffic signals is a common sight on Indian roads. Underage driving is not only a threat to self but also to others. Road accidents cause injuries, fatalities, disabilities and hospitalization. The award of compensation to be paid by the insurance firms to the victim or to family in accident cases also does not hold if the driver is underage.

Amongst the vehicle categories, two-wheelers accounted for the highest share in total road accidents (28.8%) and fatalities (31.5%). It is a sad reflection of current traffic scenario that every hour, 57 accidents and 17 lives are lost in our country [2]. The traffic police act only during 'surprise drives' and when caught the adolescents know how to circumvent the law. Poor implementation of law and violation of law seems to be a common practice.

We as health care providers must safeguard our young generation. Professional bodies must sensitize, educate and raise awareness about road safety amongst parents, adolescents and general public. There is need to incorporate traffic education and menace of minor driving in school curriculum. We must advocate and promote safety culture. We must have zero tolerance towards teenage driving for legally and morally they have to wait until they turn 18 before they can ride a powered two-wheeler.

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Status of Nurses in India

I read with great interest the referenced article in a recent issue of *Indian Pediatrics* [1]. I worked in India as a consultant for over 24 years, but then moved on – first, to Saudi Arabia, where I worked for about 4 years, and then, until the present day, in the United Kingdom.

My observations are that nurses here are appreciated much more than in my motherland. They are excellent team members. We expect them to participate actively in patient care – and they do this with a gusto hitherto unseen by me with the nurses in India. The reason is not too far to seek. They are afforded the respect that was written eloquently about in this article [1].

My understanding is that unlike the nurses in India, the nurses here are much more integrated into the medical team even though they might have fewer skills than the nurses I worked with in Mumbai. While the latter could cannulate and take blood samples easily, the nurses here are not allowed to do these tasks unless they undergo training to become advanced nurse practitioners. Thus, simply put, we underestimate, undervalue and underpay our nurses in India.

On the other hand, the managerial skills of nurses in UK are generally ahead of those in India. They can do what is called "nurse-led" activities like looking at patients in GP practices in off-hours, referring patients to higher units like the Accident and Emergency services or urgent care, coordinating patient discharges, and so on.