

usually passed into the hands of doctors when death became imminent, and so went to their credit." I have long been under the impression that to get at the true state of affairs some sort of legalised form of death certificate should be in use, so as to show to the registrar whether a duly qualified person attended during the confinement or not. May I ask, would it be right for the doctor into whose hands these cases now pass to state in the certificate: (a) Parturition; attended by a midwife; (b)——?"

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I WONDER the General Practitioners' Alliance does not meet and draw up some regulations concerning the education and registration of these Obstetric Nurses, and have it sent in to the Select Committee of the House of Commons, which will meet again next Session. The scheme of the Midwives Institute, whose members are largely unprofessional persons, has been proved so absolutely inefficient and faulty in dealing with this very serious midwife question, that it is high time that the matter was thoroughly thrashed out by those qualified medical men in general practice, who come in personal contact with the present day midwife and her work, and who see the result of her disastrous ignorance—an ignorance which can only be dispelled by a combined medical and nursing education. My own impression is that Midwives should be ended, not mended, and that Obstetric Nurses will in future take their place.

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THE *Gentlewoman* says that:—

"Hospital Nurses, according to Professor TYNDALL, only attain on an average the age of twenty-five years, whilst non-nursing women reach the comparative mature age of fifty-eight. This is such a startling assertion that, if Professor TYNDALL has truth on his side, the matter ought to be most seriously looked into, and a complete reform made in the life and régime of our Nurses. As far as my small experience goes, I have found them as bright, healthy, and energetic as they are self-denying. And this is saying a great deal. One more thoughtful and clever than the rest, told me only the other day, that although she had never felt in strong health until at eighteen she commenced her career at the Hospital, that since that time she had never had a day's illness. Many it is true, break down when first they begin their work, but with a little perseverance, are able to go on again, and keep well. Patients and their over-anxious friends and relations are too selfishly prone to consider a Nurse's time their own, and quite frequently the refreshing walk so necessary to her in the middle of the day is curtailed in a ruthless way. Very often one sees a tired Nurse taking as much fresh air as may be during her hour, on the top of an omnibus running alongside the Park. Just now, when people are not wanting their carriages—or even supposing they did—it would be a kind thought to send them for an hour or two in the best part of the day to Nurses who have had a broken night, and have probably been standing for hours together in a hot, close room."

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It would be very interesting to know the name of the Hospital which admitted the writer's friend when she was only 18 years of age. I wish *The Gentlewoman* would inquire into the matter, for I am sure its energetic Editor would then demand that fair conditions of labour should be instituted

for Nurses in the hundred Hospitals where such are now distinctly absent. It is a very depressing fact, and one which, I fear, speaks volumes for the vapid frivolity of most women, that, while the women's papers, from *The Queen* onwards, devote five-sixths of their pages every week to dress, cookery, or gossip, they only, on the rarest occasions, find space to say a friendly word on behalf of conditions of women's work. They are not, I fear, to blame. They probably know what their readers want, and give it to them; but, if they would lead, and not follow them; if they would indignantly, and continually, protest against the grinding injustice, tyranny, and sweating under which most sections of working women groan and suffer, our contemporaries would be doing a nobler work, and be bestowing higher benefits on humanity at large, than are attained in the description of a wedding, a new fashion in frocks, or a novel method of making pork pies.

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I AM glad to hear, from various sources, how rapidly the reputation of the Training School of the Chelsea Infirmary is rising in the Nursing world. Miss DE PLEDGE is to be congratulated upon the success of her untiring efforts, and it will be felt also that no small share of the good results is due to the active efforts to improve the Nursing made by the Medical Superintendent, Mr. STEPHEN MOORE, F.R.C.S. I have recently seen a private letter from a Nurse at the Chelsea Infirmary, in which she speaks most gratefully of the care with which Probationers are not only tended, but also taught. I have, on a previous occasion, drawn attention to the great advances made in the Nursing Department at the Kensington Infirmary by Miss HUGHES, and there can be no doubt that these two Poor Law Institutions are quite equal, if not superior, as Training Schools for Nurses to many of the General Hospitals in London and the Provinces.

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We have recently received an account of the formation of the Australian Nurses' Association. The standard of the R.B.N.A. was thought to be too high, at first, considering the standard of training in Australia, but it is fully hoped in time to work up to the British standard and amalgamate then with the old Association. The objects and bye-laws are thus detailed:—

AUSTRALIAN NURSES' ASSOCIATION.

Some of the many advantages to be gained by the formation of a Nurses' Association, and in the Registration of Nurses, may be briefly stated as follows:—

1. The protection of the sick from ignorant and untrustworthy Nurses.
2. In the employment of trained and trustworthy Nurses, the members of the medical profession will have the

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