

possessing the characteristic element of the sheep, the natural consequence is, we crave to have a voice in those things which concern us; but, so far, when a voice, be it ever so faint, has been raised in protest or disapproval of any matter that is put before us, at once it is attributed to aggressiveness, and the poor, or rather "turbulent ones," must needs sink again into oblivion, which is neither fair or just to those who decline to be sheep.

Years ago, Epicurus said to his followers, "the first and last thing I would say unto you is—*think for yourselves*," and that sage advice, given to men and women two thousand years before the birth of Christ, holds good for the present time, inasmuch as without independent thought progress in any form cannot be effected.

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#### THE MENTAL NURSE QUESTION.

To the Editor of "The Nursing Record."

MADAM,—In reading the correspondence in the NURSING RECORD, it is irritating to some of us who are Lunatic Asylum Attendants to find ourselves frequently brought forward and spoken of disparagingly as untrained, uneducated women, the question discussed as to whether or not we deserve to be designated "Nurse," and great alarm expressed lest we should presume to place ourselves on an equality with those Nurses who, with much ostentation, usually describe themselves "Trained Nurse," "Fully Trained Nurse," "Thoroughly Trained Nurse." As regards the proposed registration of Mental Nurses, it is unlikely that any of us would wish to be placed on the Register with Hospital Nurses, with the intention of palming ourselves off as such. We are satisfied with our own work, which is as interesting, useful, and important as the nursing of bodily illness can be. Many people are ignorant of the advancement made in the treatment of insanity and the training of Asylum Attendants.

Eight years ago it may have been true that an Attendant should be engaged two years in Asylum work and receive no training to fit her for the better understanding of the different forms of insanity in the patients under her charge. Now, things are different.

In the Asylum where I have now lived two years I, with many others, have attended three courses of lectures, and passed the three examinations, viz., First Aid, Second Aid—which includes general Nursing—and the Medico-Psychological.

Of course, there are some who take no real interest in their work, and will not trouble themselves to attend lectures and go in for examinations, but the time is approaching when these indolent ones will find they must look for some other employment, as they will not be received in Asylums unless they hold the psychological certificate.

Insane persons are liable to sickness and disease. They must be, *and they are*, nursed as carefully as those not insane, their mental condition rendering the work of nursing often very difficult.

So, although we have not had the magical three

years' Hospital training, we are educated for the work of tending and caring for the insane, and for the sick insane.

It is unfair to call us "Bogus Nurses" and "So-called Nurses" because the nursing is performed outside a Hospital.

ANOTHER MENTAL NURSE.

To the Editor of "The Nursing Record."

MADAM,—I am an Asylum Attendant, and sympathise with those trained Nurses who object to any alteration in the present regulations for Registration of a retrograde tendency. I do so on these grounds: We Asylum Attendants are *not* trained Nurses, although we have to know something of Nursing, but such things as passing catheters and other skilled methods we are never taught; and, secondly, we are not ready for Registration. That public attention has been drawn to our work and condition is beneficial, because many reforms are needed in Asylums, and the more discussion there is the sooner will abuses be made known, and I hope the public will insist on improvements. The Royal British Nurses' Association has much work which it ought to accomplish for the benefit of trained Nurses. How about the twelve hours day, the lack of a uniform curriculum of education; and are not Nurses' examinations, if they take place, still conducted in private by the lecturers, and not by unbiassed examiners? Do not these things require remedies? Why, therefore, does not the Royal British Nurses' Association proceed to pluck the beam out of its own eye, and leave our mote for future consideration. I am of opinion that if we Asylum Attendants are to get improvements in our hours of work (fourteen hours in many cases), and the sick insane to have the benefit of really efficient care; we must organise ourselves irrespective of the Royal British Nurses' Association, and we must demand at least one year's training in a General Hospital to fit ourselves to care for the sick insane. I believe if the Royal British Nurses' Association admits Asylum Attendants as members, and registers them as Nurses, that their action will prevent our getting any internal reforms in Asylum Nursing for years. Again, those of us who read, are by no means inclined to put our professional neck in your official noose; what will it mean? That our Medical Superintendents will be given powerful positions on your Corporation, and we as voiceless members shall be deprived of all power of personal action off duty, as well as on duty. Many Asylum Attendants consider that the members of the Royal British Nurses' Association cut a very sorry figure in sitting mum-chance at their public meetings, and being deprived of free speech. May I inquire if the Corporation has been consulted concerning the admittance of Asylum Attendants? If so, when?

If we Attendants are to do any good we must help ourselves, and that by forming ourselves into a strong body, as the Midwives and Masseuses have done. Both these bodies of workers have their own Societies, and manage their own affairs; they exist without the patronage of the Royal British Nurses' Association. We Asylum Attendants must do likewise; so the sooner we take steps to unite the better.

Yours truly,  
B. S.

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