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NOTES, QUERIES. &c.

Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in any way hold ourselves responsible for the opinions expressed by our correspondents.

THE ENDING OF MIDWIVES.

To the Editor of "The Nursing Record."

DEAR MADAM,—I feel very strongly in accord with Miss Breay on one point on the Midwife question, and that is, whether the proposed legislation Mends or Ends Midwives as a class, it would be the death knell of educated midwives-as I am very sure this class of woman which the poor appreciate so greatly will not take out a licence, and place themselves at the mercy of unknown persons. The medical authorities in a district might or might not be kind and just—but women workers should not be compelled to take such a risk, no local medical authority should have power over individual midwives—the professional power should rest in an impartial central Board—and it is imperative for the sake of justice that midwives should have seats on that Board.

One becomes more and more hopeless every day, that women will be accorded *rights*, we are weary to death of privileges.

Yours truly,
A MIDWIFE.

"A Midwife who will be ended."

THE MENTAL NURSE QUESTION. To the Editor of "The Nursing Record,"

DEAR MADAM, — As the Royal British Nurses Association is no longer a professional association, but now merely exists for philanthropic and patronage purposes, why should not asylum attendants be members? It is now quite certain that a new association of nurses must be arranged for professional advancement; the Matrons are co-operating, why not the nurses? The real truth of the present deplorable condition of trained nurses in this country is their own inertia, and total lack of professional pride and respect. Don't let us entirely blame the stronger sex for their belief that we are unfitted for any degree of self-government, we have proved ourselves as a profession absolutely No other class of women have had a Royal Charter granted to them and given it away.

Yours, S. T. NURSES' SETTLEMENTS. To the Editor of " The Nursing Record."

DEAR MADAM,-I read with the most extreme interest the article published recently in the NURSING RECORD, by Miss L. L. Dock, on the subject of Nurses' Settlements in New York. I have been pondering over the matter, and wondering whether it would not be possible to have something of the same kind in this If your readers have been half as interested country. in the article as I have been, I feel sure that some of them must be thinking the same thing. It would

ventilate the subject if they would express their views in your columns. Who knows whether some scheme suggested in this way might not ultimately take a practical form. In London over the border—in Poplar for instance—where women still make linings for men's trousers, buttonholes included, for 2½d. a pair, such a settlement might become a real centre of sweetness and light; but all these things need a certain amount of capital, and, unhappily, nurses as a rule are not moneyed people, but perhaps some of those who have plenty of money, and who consequently have obligations to their power might are might if have obligations to their poorer neighbours, might, if they do not feel disposed to discharge these obligations in person, provide proxies to do their work. I wonder how it is that all things connected with nurses prosper in the States. Is it that nurses are broader minded, and more appreciative of one another's work than they are in this country? I must say I just ache to go over to America sometimes, to see how they manage. One thing no doubt which helps the nurses not a little is that the organization of their professional associations is in their own hands. Oh the wisdom of it!

Yours faithfully, An Imperialist.

THE DIFFICULTIES OF FOREIGN NURSING

To the Editor of the "Nursing Record."

DEAR MADAM,-I notice that you comment in the NURSING RECORD upon the frequency with which Nurses who go abroad break their contracts, and upon the obligation which rests upon them to fulfil the engagements they have entered into. Having had some experience of Hospital Superintendence abroad, I should like to say how difficult one's position often is. To begin with, of course, it is only right that all nurses sent abroad should be fully trained; but this fact, to start with, creates a difficulty, because one has far less control over them than one has at home, in a hospital where the larger proportion of the staff is still training. Then one is unable to select one's own nurses, and if, as happens sometimes, a nurse on arrival should prove unsuitable, one must either put up with her or the Committee of the Hospital must accept the very serious loss entailed by paying her passage out and providing her outfit, and then of getting no equivalent for this outlay, so that one feels compelled to make the best of "thorns in the flesh" from monetary considerations.

But there is another side also to be considered. Supposing the nurse herself breaks her contract when she has been at work for a few months? Of course she has undertaken to refund her passage and outfit money, but she does this with a light heart, knowing well that she has no possible means of refunding this money, and confident that no Committee can bleed a stone, and that it will shrink from proceeding to extreme measures. I must say that I think the regulation of the Colonial Nursing Association which requires its nurses to find two persons at home to guarantee the amount which has been expended upon them, should they break their contract for reasons unapproved by the Committee, an extremely wise one. It at least insures that the guarantors believe that the nurse is a responsible person who will not lightly break an agreement, and secondly, it provides a source capable of being bled if need be.
Yours faithfully, ONE Who Knows.

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