

closely connected with the work of supplying nurses, or of organising the nursing departments in the camp or field hospitals. Several of the latter were heads of large training schools, who, through their double experience of civil and army hospital methods, were well qualified for the work. The Bill which I will read, and which has finally been approved by the Surgeon-General, as you will see, is brief and to the point. It has passed through the fiery ordeal of a congressional campaign, been shorn of many of its sections we would have preferred to retain, and has been returned to us without having passed either house, although it was favourably reported by the Committee on Military Affairs, and obtained a majority vote in the House of Representatives, but not a two-thirds majority vote, which is necessary for its adoption. There are many reasons to account for this. We were late in getting the matter into the proper hands, the Bill was returned so many times for modifications that when it at last assumed the present form, approved by the Secretary of War and the Surgeon-General, it was during the last few days of the session, and our Bill was crowded out by other business. We have been defeated for the time being, but we are not discouraged, nor are we idle. Our forces are gathering strength, and next winter's campaign will find us ready to renew the attack. Our greatest difficulty has lain in gaining two points which we consider of vital importance—a commission of women who shall have the nomination of candidates for the office of Superintendent of Nurses, and a Superintendent of Nurses who shall be a nurse and a graduate of a school giving not less than two years' course of instruction. We have virtually gained the Surgeon-General's consent to these in our Bill, although he has qualified the latter clause by adding "or from a legalised medical college," and at present, this position is held by a woman medical officer, under the title of Acting Assistant Surgeon U. S. Army. We have been obliged to make many concessions, but these two points are so essential for the foundation of any practical working system, that unless they are allowed, we feel that it will be impossible for us to associate ourselves with the work.

Nursing, as a profession, stands alone, it is purely the outcome of women's work; even the medical profession, with all the help it has afforded us, has done very little towards working out our methods or raising our standard, and in this new branch of the work it is to nurses that we must look for the experience which alone can assure success. The task will be no easy one. Politics, prejudice, and personal feeling stand in the way of success, but what has been accomplished in our civil hospitals in the past may be accomplished in army hospitals to-day.

The nursing profession is much dissatisfied with the existing conditions of the nursing service, and the status of nurses in the army. That the Surgeon-General also is not satisfied is shown clearly by his many appeals to our Committee to assist him by suggestion in forming rules and regulations for the government of the service. But we feel that all the assistance we can give in this direction is thrown away unless applied understandingly by those thoroughly conversant with the detail work of a large hospital and training school.

We fully realise that any such organisation as we propose must be part of the medical department or hospital corps; we do not wish to usurp any authority that does not rightly belong to us. Strict obedience and allegiance to superior officers is one of the first principles governing a nurse's education. The Superintendent of Nurses should be subject to the orders of the Surgeon-General in the army service, as one holding that position in any civil training school is subject to the orders of the Superintendent of the hospital with which it is connected. But we do claim that the management of a nursing service is essentially nurses' work, and should not be undertaken by anyone not entirely familiar with its every requirement. A medical school cannot give this training. Medical officers, whether men or women, are totally ignorant of the manifold details and requirements necessary for the selection and control of a body of nurses. Such knowledge can only be gained by years of hard work and careful study in the wards of a hospital, and through personal experience of its daily requirements from the work of a probationer to that of a superintendent. Chaos would reign supreme in any hospital where the nursing staff was supervised by a doctor.

The Government will find that in introducing this new element into army life they must admit many modifications of their regulations to meet the new conditions. Army hospitals, as far as the nursing is concerned, should be governed by the principles which pertain to civil hospitals, but these should be specially adapted to meet the demands of military rules and regulations. Under the present army regulations the chief nurse has no control over the nurses under her, nor of the male attendants, although it is in some instances permitted by the courtesy of the officer in charge. Stewards and ward masters are, to a certain extent, in charge of the wards. The surgeon in charge of the post alone has the power to retain or discharge nurses. If a nurse is recommended for discharge for improper conduct, he can retain her services if he chooses, and the chief nurse is powerless. She can resign if she wishes to do so. These are only some of the many abuses of the present system. Our

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