

propose to deal with the scientific development of Naval and Military Nursing, to compare it with Civil Nursing, and thirdly to speak of Suggested Reform. The scientific nursing of our soldiers and sailors was first started in the Crimea under Florence Nightingale, that noble woman who is known to have stood for twenty hours in succession, in order to see to the proper disposal of the sick and wounded under her care, who numbered at one time 10,000. In 1860, a Training School was organised at St. Thomas', and before 1889, 500 nurses had passed through that establishment. Those uninitiated on the subject of nursing, do not understand that it is not the shot and steel of the enemy that the soldier has most to dread. It is, as it were, the aftermath of war. As an example, let me tell you that at the time of the Crimean War, for every man of military age who died at home, no fewer than 23 died in the Crimea, and only 3 per cent. of these from wounds. In the Egyptian Campaign, of 1882, the proportion was 18 to 72, and in the Russo-Turkish War, only a very small percentage eventually reached their homes. This shows the necessity for efficient nursing in naval and military affairs. Now, as to the contrast in nursing in naval and military and in civil life. In civil nursing you have Matrons, Sisters in Charge, nurses and ward maids. How does this compare with the arrangements in military hospitals? There is the Superintendent of Nursing, but after that there is a complete hiatus; the Staff Nurse, the probationer and the ward maid are missing, and the whole of their duties are thrown upon the Superintendent, the Nursing Sisters, and the Army Medical Corps. The acting Superintendent has herself to take charge of wards and cases, and is in the absurd position of being supposed to control, and, at the same time, to do a share of the work. Fancy an Officer being asked to command a regiment, and at the same time to attend to the interior economy of a company in the same regiment. Nursing Sisters have no fixed wards, and the Staff Nurses are absent. Then I come to the Army Medical Corps. The men are enlisted in the ordinary way, they are put through their drill, and do some fatigue duty at Aldershot; they have lectures, and receive one half hour's daily training in practical nursing from a qualified Sister for six weeks. Yet these men are afterwards expected to deal with accidents, wounds, and chronic cases, and to do the greater part of the night duty in our military hospitals. I may mention that a nurse with ten years' army experience said that during the whole of that time she had seen only five competent male nurses. Now as to Reforms. In the first

place, I would advocate a Lady Inspector, who should be responsible that the nursing at the military centres be kept up to one high standard. A Board should be elected to consist of two medical officers and a highly trained nurse, who should see that suitable candidates, as regards character, are selected for nursing duties. There should be a considerable increase in the number of nurses, seeing that at present, owing to the dearth of nurses, the night nursing at our military hospitals is almost entirely neglected. Then as to the training of hospital orderlies. The most suitable men who join the Army Medical Corps should be sent to Netley or another large hospital, and put through a training course of three years. In this way the military authorities would be training a staff of male nurses for the country who would afterwards be competent to earn good fees by taking charge of paralytic and mental cases, and who would form a reserve to be placed at the service of the country in time of war. The flaw in the Soudan Campaign was distinctly the way in which our soldiers were nursed, and I felt compelled to take a division in the House of Commons in relation to this point. Even at Alexandria, the base of operations, where many men were lying ill with enteric fever, 70 patients were left to two nurses and to the orderlies or so-called male nurses. There is no doubt that more than half the patients lost would have been saved under anything like a decent system of nursing. I have already stated that I am in favour of a large nursing reserve; also of a hospital ship, with a staff of trained nurses; and I must add that I should like to see the pensions of nurses increased.

May I be permitted to offer a word of encouragement to those who offer the best years of their womanhood to the task of watching by the bedside of the sick. An army nurse may be called upon at short notice to proceed to the most pestilential climates, to endure the hardships of a campaign, and, even at home, her lot is not cast in pleasant places; but she has the immense gratification and consolation of knowing that when her career is drawing to a close a Recording Angel will not fail to register deeds of duty nobly done.

DR. MARGARET CHRISTIE said she hoped she would be pardoned for speaking at a Nurse's Meeting, although a Doctor, for she numbered many Nurses as her warm personal friends. The only point upon which she wished to add her testimony, was the one raised by both Mrs. Quintard and Captain Norton, namely, the advisability of a Committee of women selecting candidates for nursing in the Public Services. She spoke from experience of Poor Law Infirmaries and other Institutions at home, and of Public Services in India. Men were apt to be too kind-hearted to make a judicious selection; as Poor Law Guardians, and in other responsible posts, they were sorry to dis-appoint candidates and anxious "to give a young

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