

New necessities are always arising, which it is difficult or impossible to meet with the funds at the directors' disposal." The same appeal for help for hospitals coming from so many different quarters, shows that it is necessary seriously to consider the question as to how these most necessary and admirable institutions are to be maintained in the future.

THE POWER OF THE VOTE.

We have often pointed out the immense disadvantage at which trained nurses find themselves, with regard to the organization of their profession, owing to their voteless, and therefore voiceless position in national matters. It is most difficult for them to bring any pressure to bear upon members of Parliament, and therefore to obtain any nursing legislation, because members, not unnaturally, prefer to bring forward other questions, concerning which pressure has been brought to bear upon them by male electors. We question, indeed, whether any effective nursing legislation will be secured until women are recognized as responsible beings, with a right to a voice in national matters—to go a step further—until the loss suffered by the nation in the exclusion of the assistance of women is realized, and the right to take their share in returning Members of Parliament is secured to them. This fact is once more brought home to us by the attitude—under present conditions a very natural one—adopted by Dr. Shuttleworth, the editor of *Asylum News*, with regard to assured pensions for Asylum Workers. Does he address himself to female attendants on this question? Not at all. He knows the futility of doing so. His editorial remarks are worthy of note. He writes: "The matter will now have to be fought out at the polls, for a dissolution seems to be imminent. We earnestly commend to all *Asylum voters** the course which has been so successfully adopted at the Prestwick Asylum, and we do not hesitate to say that if each public asylum would follow this example, and press upon their local candidates for Parliamentary honours a pledge as to pensions, the battle would be as good as won." Mr. Rhodes was, of course, right—"THE VOTE COVERS ALL." Perhaps when it has finished spending millions upon millions, and pouring out blood like water, to obtain the vote for the Uitlanders in South

* The italics are ours.

Africa, the nation may bethink itself of the women Uitlanders at home whom it at present ranks with criminals, lunatics, and paupers. Women need never suppose, however, that they will obtain their vote merely by asking for it. It will only be wrung reluctantly from male legislators by forcible insistence.

THE BETTER EDUCATION OF MIDWIFERY NURSES.

Speaking at the meeting of the British Medical Association, held at Ipswich, in a discussion on Puerperal Fever in relation to notification, Dr. John Campbell, M.A., M.D., F.R.C.S., Senior Physician to the Samaritan Hospital for Women, Belfast, and Assistant Physician to the Belfast Maternity Hospital, said some wise things on the question of midwifery nursing. After pointing out that at present the average middle class lady prefers to have a "homely woman" whom she likes, rather than a thoroughly competent and well trained nurse, he pointed out the dangers arising from the ignorance of the so-called nurse. He went on to say that at the present time the amount of disease communicated to parturient women by the medical profession was infinitesimal. "What we want," he said, "is the improved education of nurses, and improved social status of nurses. We want to raise the midwifery nurse to the same level as her surgical sister. By so doing we shall minimise the amount of puerperal fever to the greatest extent, but we shall not abolish it entirely. The doctor is now beyond suspicion. The nurse can be improved so as to be safe." We may point out that the most effective method of raising the midwifery nurse to the same level as her surgical sister is to require all midwifery nurses to have taken out a course in medical and surgical nursing, in the same way that all three qualifications are required of a medical practitioner before he is allowed to practise any one of them. Then let her be registered, so that the public may know who has been trained in the skilled performance of the duties she undertakes, and who has not. We entirely agree with Dr. Campbell's suggestion as to the importance of the improved social status of nurses. The practice of giving three months' training in midwifery to working women, and then foisting them on the public to nurse midwifery cases, as well as general diseases, cannot be too strongly deprecated, and should be widely condemned by the medical profession.

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