

We publish below Dr. Robertson's letter, which proves conclusively that the standard of education for asylum nurses should be organised on the lines always advocated in this journal and by those nurse members of the R.B.N.A. who opposed Dr. Outterson Wood's reactionary suggestions on the mental-nurse question:—

“As one deeply interested in the future of asylum nurses, perhaps you will allow me some space to recommend nurses to adopt a broader-minded, more progressive, and more hopeful outlook than that suggested by the letter that appeared last month on this subject. Let me begin by saying that

“(a) I do not see what good can come from quoting the rude remarks of certain uninformed hospital nurses about asylum nurses, when our object should be to bring together both classes of nurse, and teach them to respect each other's merits.

“(b) That hospital nurses, without special mental training, are incompetent to manage troublesome insane patients is acknowledged by everyone, and, in my experience, most readily of all by the nurses themselves, who feel out of their element. What satisfaction is obtained by recording the obvious once more?

“(c) If asylum training is not allowed to count as part of general hospital training, asylum nurses must not think this a regulation which presses especially heavily on them, nor is it a slur or reflection on their asylum training. Training in a fever hospital does not count as part of general hospital training, nor does training in a sick children's hospital, even with surgical wards, and, most remarkable of all, no previous experience, even if of two years' duration, counts as training, if received in another general hospital.

“(d) Lastly, if asylum nurses have a grievance, have not hospital nurses one also? A hospital nurse with a three years' certificate of training must serve her full term of two years in asylums like any beginner, if she desires the certificate for mental nursing. Many have complained to me of this want of consideration, and I have proposed at a meeting of the Medico-Psychological Association that their three years' previous training should count as one year, and this proposal was not seconded. I have also asked the Registrar in a special case that it might count for a fortnight only, and he informed me that the Council would not allow it.

“Next let me answer the question, why does general hospital nursing enter into this asylum subject at all? Is it not because it is the central and main trunk of the whole system of medical nursing, and because fever nursing, sick children's nursing, and mental nursing, &c., are merely special branches of this system? Is it not also because in developing a good specialist, it is recognised that a preliminary general medical training gives a deeper insight and greater breadth of view? As a result of this, the matronships and best appointments in asylums are now being given to women who have had this ideal double training, and, when such candidates are not available, to hospital nurses, because within two years after their appointment to the asylum they acquire this double training. No one who is interested in raising the status of asylum nurses can object to the standard of qualification for asylum posts being raised, and in this respect to bring asylums into

line with fever hospitals and children's hospitals, where the Matrons and usually the charge nurses must possess both general and special training. These appointments, I observe, have also this effect, that they are bringing hospital and asylum nurses into contact, they are becoming mutually enlightened, their sympathies, their interests, and their ideals are every day approximating more closely to one another. Rude and uninformed remarks about each other will die out, and a day will surely come of closer union and mutual regard.

“What, then, have asylum nurses to look forward to in the future? They may look forward in confidence to a time within our generation, when as regards work, food, comfortable homes, and privileges, they will be treated on exactly the same footing as hospital nurses, and when they will hold as high a place in public esteem as other nurses. The surest way, moreover, to hasten this time is for asylum nurses to hold as high an ideal of work, duty, and behaviour as their hospital sisters, for there can be no doubt that the public position of asylum nurses is a reflex of the evil work done in asylums by their predecessors. The good work done at the present time, and the better still that we are striving for, merits and will receive its just reward at the hands of the public. Then as to future promotion. It is quite obvious, in Scotland at least, judging by the appointments during ten years, with an exception or two that may be ignored, that no nurse, only asylum trained, need expect a matronship or other valuable post. To such, then, who are ambitious of promotion, and who possess the necessary personal qualifications, I would recommend as the surest means of promotion that they should complete their medical training in a general hospital. With this double qualification the best appointments in the Lunacy world are open to them. Seven of my nurses have in the last four years obtained full matronships. All these were hospital nurses who completed their training in the asylum; but the majority of my friends declare—and among these is Dr. Urquhart—that if the candidates were available, they would prefer an asylum nurse who had completed her double training in a hospital to a hospital nurse who had finished her training in an asylum, as in the former case the first love would be the asylum, and she would probably be a more devoted asylum nurse.

“I believe at no period have the prospects of well-educated, intelligent asylum nurses been better than at present, if they follow this advice. I also believe that the more close and numerous we make the bonds between hospitals and asylums, the sooner and the more completely will the nurses of asylums attain their desires—equal position and equal privileges with those of hospitals—and it is certain that the many Matrons of asylums who now are certified hospital nurses will press forward the claim of their nursing staffs.”

Nurse Dodd, who is retiring from the position of Superintendent Nurse at the Coventry Workhouse after twenty-four years' service, has been presented by the officers of the Union, as well as by the inmates, with various presents, including a valuable timepiece. The presentation was made by

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