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Editorial.

PREVENTIVE NURSING.

We have heard a great deal of recent years about preventive medicine, and every day the work of keeping the community in health is recognised as a branch of medicine of equal importance to that of curing it when sick. To the allied profession of nursing the question of prevention is also appealing with increasing force. No one knows better than the hospital nurse the after-consequences of illness. Perhaps there is no joy purer or more intense than that of the doctor and the nurse who, after a hand-to-hand fight with death, find skill and care rewarded by the ultimate recovery of the patient, and the return to health of the bread-winner, of the mother of the family, or of the child who is the light of the home. But there is another side to the picture, and most thoughtful nurses as they speed convalescent patients on their way are saddened as they think of the future, of the lessened powers of resistance to the inroads to disease, of the probability that sooner or later the same patients will come under their care once more, of the truth that the battle of life is won by the strong; and, lastly, that much of the sickness and suffering in the world is caused by ignorance, and is consequently preventable.

It is the weight of woe caused by preventable suffering which weighs so heavily on many nurses. The misery of it all is constantly spread out before them. Is it in their power, they ask themselves, to do anything to lessen its sum total?

It is well, it is necessary, to extend a helping hand to those who have fallen over a precipice and received serious injuries. Science can do much to mitigate the sufferings of the injured, and to minimise the after-effects of the injuries received. But it is of paramount importance to place a fence at the top of the precipice so that accidents may not occur at all.

Our hospitals may be likened to ambulances at the foot of the precipice. They are essential to the welfare of the injured. But the lesson of the necessity for the fence at the top, in a knowledge and observation of the laws of health, is not far to seek. Are not the hearts of such amongst us as have seeing eyes often hot within us at the havoc wrought in child life, not so often by wanton neglect as by appalling ignorance on the part of children's natural guardians, and again at the wreckage of adult life caused by absolute disregard of the laws of health? So it comes to pass that nurses are increasingly learning the importance of a knowledge of hygiene, and realise that their professional knowledge is turned to good account if, moved by a passionate longing to do what in them lies to stem the tide of sickness and suffering around them, they turn their attention to disseminating the laws of health among the people. To nurse the sick back to health is good, but to teach the physically sound how to keep well is of equal importance. True, inasmuch as normal conditions as a rule do not excite so much interest as deviations from the normal, the prosaic work of endeavouring to keep the community in a normal condition does not appeal to all; but to the thinkers, who have plumbed the depth of the suffering caused by ignorance, the life of a teacher of hygiene may well appeal; and, indeed, a nurse need desire no more useful career than that of health missionary in the homes of the poor.

Recently also it has been pointed out that there are openings for women as sanitary inspectors in oriental countries where, by custom, men are prohibited from entering many parts of a dwelling. Who better able to fill such posts than trained nurses, who could not only diffuse the principles of sanitary science, but would also gain access, to the thousands of sick women practically immured for life, and take to them the skilled care they so sorely need?

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