

siderations, and to join hands with the object of concentrating their powers to obtain the enforcement of a minimum educational standard and the accordance of legal status to those nurses who have attained it.

In other countries Registration is in force in Cape Colony, Natal, New Zealand, and in five of the United States of America, while in thirteen other States nurses are organising with this end in view. In Germany, nurses are endeavouring to obtain legal status, and in New South Wales and Victoria, as we have already seen, voluntary systems of Registration are in working order, and consideration is being accorded to the best methods of obtaining legal status. A Bill for the Registration of Midwives has recently become law in New Zealand.

In connection with the Registration movement, an article putting the case for Registration in a masterly manner, appeared from the pen of Lady Helen Munro Ferguson, in the *Nineteenth Century and After* in February of this year. It was followed in May by a lengthy article voicing the views of the opposition by Miss Lückes, Matron of the London Hospital, and again in June by two papers advocating this reform by the Marchioness of Londonderry and Miss Isla Stewart, Matron of St. Bartholomew's Hospital, London. The honours in this paper campaign, which kept the question well before the public, must certainly be accorded to the Registrationists, and trained nurses owe a debt of gratitude to Lady Helen Munro Ferguson for the trouble she has taken to acquaint herself with the subject, and for the generous and able way in which she has dealt with it.

THE MIDWIVES' ACT.

The Central Midwives Board is now fully constituted. It meets monthly to deal with the many problems with which it is confronted, and has already registered over 11,000 midwives. Already it is apparent to those who attend the meetings that the midwifery question is intimately associated with the nursing one. That is to say, the value of a midwife depends not only upon her skilled care during labour, but also on her ability to give nursing attention during the puerperal period. The point is of importance, because, in view of the fact that the Privy Council has expressed a decided opinion that only medical practitioners should be appointed as examiners, there is a danger lest the examination should become principally theoretical, whereas the capacity of a midwife to perform the nursing duties required of her under the regulations of the Board should be tested by those who have had practical experience in performing such duties.

THE NURSING SERVICES.

In the Royal Naval Nursing Service there seems to be stagnation, the arrangements being practically the same as for years past, and, from a civil stand-

point, the nursing staff is quite inadequate numerically for the work to be performed.

In Queen Alexandra's Imperial Military Nursing Service the staff has been considerably increased, and every effort is being made to make the Service thoroughly efficient. The appointment of a Matron-in-Chief has proved an unqualified advantage, both for the good government of the Service and also for the convenience of the public, who now feel that there is an official at the War Office who can be relied upon to give expert advice on military nursing matters.

DISTRICT NURSING.

In district nursing the nurses of the Queen Victoria's Jubilee Institute are doing excellent service through the country. There appears to be some danger, however, lest the multiplication of county and rural associations with a quite inefficient standard of education should, to a great extent, nullify in the future the good work of the Jubilee Institute, and frustrate the intentions of the late Queen, whose desire was, that the sick poor should, through the agency of the Institute, have the same skilled care as that available for the rich. It will be an ill day when we lay down, as sufficing for the poor, a standard of nursing which we do not consider adequate for the rich.

PRIVATE NURSING.

In the private nursing world the thoroughly-trained nurse suffers much from the competition of untrained, and semi-trained persons. Until nurses are accorded legal status on giving evidence of the attainment of a certain definite amount of professional knowledge, the private nurse has no effective means of affording a guarantee to the public of her competence to perform the responsible work which she undertakes. It behoves all such nurses, therefore, to work for the organisation of their calling by means of State Registration. None come more in contact with the urgent reasons for this measure, and none have a wider field of influence amongst members of the public. So far, we do not think that they have risen to a full sense of their responsibility in this respect, nor have the nurses connected with co-operations done very much, as a whole, to help their profession generally. The co-operations were originally founded to rectify a crying evil, namely, the utilisation of large sums earned by private nurses by the middleman, whether an institution or a private speculator. It is already apparent that, to be quite satisfactory, co-operations should definitely adopt an ethical, as well as an equitable commercial basis, and that the members should definitely associate themselves together to further professional aims, as well as to obtain a fair remuneration for their services.

In the present unorganised condition of labour a large number of untrained women are taking the

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