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## Editorial.

### THE SUPPORT OF DISTRICT NURSING.

The nursing of the sick poor in their own homes is a matter which must appeal to all who have any sympathy with distress and suffering, and surely if one cause more than another should evoke the liberality of the wealthy it is to be found in this. For it affords an opportunity for an expression of good feeling which can only have a beneficial effect, and is, moreover, so plain a duty that we might have expected those who are endowed with this world's goods to give gladly of their wealth, so that skilled nursing care might be within the reach of every really poor person in the land. Further also, in order that the nurses whose work in the homes of the poor is an acknowledged agent for good, not only in connection with the special circumstances of the case, but also as an agent in permanently raising the hygienic standards of those amongst whom they minister should be adequately remunerated. Few will deny the proposition that work of such value should not only be appreciated, but should be well paid. But what is the fact? If we consider the wage-earning capacity of trained nurses, we find that if they undertake private nursing work they can, if they take their own fees, command £2 2s. to £3 3s. a week, with board, lodging and laundry expenses when at work, which is, of course, the greater part of the year. Thus, if a nurse chooses, she can during her working years make provision for the days when she can no longer undertake active nursing. And, be it remembered, that the nurse is a working woman, that in the large majority of cases nurses have no means of future support to look forward to, but must depend on their own savings, and if these are not sufficient to maintain them, they must fall back upon public or private benevolence to do so. Further, that the average period of wage earning for nurses is certainly not more than fifteen to eighteen years, and it is of the utmost importance that

they should, during this period, be able to put by a considerable sum.

How do the average earnings of the nurse who works in the homes of the poor compare with those of the private nurse? If she is fortunate, that is, if she works under the Queen Victoria's Jubilee Institute, she may count on board, lodging and washing, and a salary of £30 per annum. She lives much more frugally, and her work is much more laborious, than that of the private nurse, and it says much for the real sympathetic interest of the nurses of this country towards the sick poor that they are willing to forego the higher fees which they can command in other branches of their calling, in order to minister to them.

How is the expense of district nursing work defrayed? Surely, it will be answered, by the liberality of the wealthy. But is this the case? To take a definite instance. Last year "in Windsor, Eton, and Clewer 673 cases were nursed by the district nurses, who paid 14,876 visits. The total sum received from subscriptions is very small, the cost of a district nurse is £100 per annum, and a considerable deficit in this branch of the expenditure has to be met from profits derived from the work of the private nurses." If under the shadow of Windsor Castle (it must be noted that the King and Queen both subscribe liberally to the work) the expense of nursing the sick poor of Windsor is "defrayed to a considerable extent from the earnings of the private nursing staff"—which means, of course, that these private nurses do not receive the balance of their earnings after expenses are paid, but contribute to the salaries of the district nurses—there must surely be something very wrong both with the public conscience, which will permit such a system, and with the public generosity, which fails to support so necessary a work. For their own credit, if not from philanthropic motives, the wealthy residents in the neighbourhood of Windsor should not allow trained nurses to defray the expense of nursing their sick poor.

[previous page](#)

[next page](#)