

A meeting was recently held in the Town Hall, Newark-on-Trent, under the presidency of the Mayor, with the object of providing a nurse for such cases within the borough as are unable to secure other attendance, when it was unanimously agreed that this course should be adopted. Nurse Peterkin said that the cost of a Queen's Nurse would be from £85 to £100. There was plenty of work for another nurse. It was agreed that the association should be affiliated to the Queen Victoria Jubilee Institute, also that the nurse's services be restricted to members making a small monthly or annual payment, or to non-members who paid during illness on a higher scale.

An order issued by the authorities of the public hospital at Lagos, West Africa, says the *Daily Express*, insists that nurses employed in the institution shall perform their duties barefooted.

The issue of such an order is scarcely credible. Surely a contradiction of the statement may be anticipated. In consequence of the prevalence of jiggers, an insect about the size of a flea, which burrows under the skin and causes most painful disease of the feet, even natives wear a foot covering much more frequently than formerly. The native will also kill a snake with his bare foot, but a nurse would scarcely be sufficiently proficient to achieve this. What would be the result if she came in contact with one?

We are glad to see that an appeal is being made in England on behalf of the Up-country Nursing Association, an institution which fills a much-needed want, and is doing good work in these provinces and the Punjab. The Association's tenth report shows that during 1904 the nursing staff, which varied in numbers from nine to twelve, attended 104 cases on 2,408 working days. In the interests, not only of the better-paid classes of public servants, but also of those in the subordinate grades and the poorer members of the non-official community, who, if standing alone, would be quite unable to provide an effective nursing service for themselves, the Committee are desirous of securing such a measure of financial support in England as will enable them to increase materially the staff of nurses in India, and thus largely extend the benefits of the Association.

Miss M. S. Gilmour, in her admirable paper—"Nurses' Homes and School Buildings"—read before the recent Nurses' Convention at Washington, U.S.A., says:—"Every training-school should have a home for its pupils outside of the hospital, away from the nervous strain caused by the sights and sounds of the hospital. Each nurse should have a single room (no matter if it is a little crowded), with fresh air and sunlight and simple furnishings, a place where she can dress without going into the

halls, for her clothing, where she can shut herself up to study when she wishes, and where she can retire for the good, old-fashioned cry that every strained nerve needs, and which we are often ashamed to own we ever need. That single room does more to stiffen the moral backbone than all the precepts of the three-years' course."

And again: "Every school should have a library, for reference and for general reading, with the newest fiction predominating. A nurse does so much hard study and sees so much of the hard facts of life that the lighter reading is a mental relief to her, and it also keeps her in touch with the current literature of the day, which her patients generally read. There should be a parlour in every home; and if the parlour, library, and lecture-rooms could be arranged so as to be thrown together for nurses' gatherings, such as commencements, musicales, or dances, so much the better. The nurses should be allowed to receive their male friends in the parlour. I remember a gentleman being obliged to wait for a nurse, his cousin, on a windy corner in early winter. She was delayed half an hour and he was afraid to leave the corner for fear of missing her. I did not hear if he contracted pneumonia from exposure. It was providential if he didn't. What right have we to force superior young women into meetings on the street corners?"

Miss Drown, of the City Hospital, Boston, opened the discussion on this paper, and ended many wise remarks by saying:—"Having considered the modern nurses' home, the mind naturally reverts to the accommodations provided for the pioneers in the work of nursing. We do not need to be told that they were inured to the stern reality, included within the four walls of a hospital. The question will arise in the minds of all interested in the education of nurses if there is not danger in the pendulum swinging too far in the direction of personal ease, comfort, and almost luxurious surroundings for women who are later to take part in the battle involving the suffering and the calamity of the world." The sturdy stoics of the eighties are asking themselves the same question on "this side."

The problem of destructive nurses is evidently as acute in the United States as at home. Miss Mary E. Reid, of Cincinnati, says sensible things on the question in last month's *National Hospital Record*.

That "how to impress nurses with any feeling of responsibility in the use of hospital supplies and appliances is a great problem in every hospital" is only too true. She writes: "It has long been 'a great problem,' and to the mind of the serious, earnest hospital superintendent must remain a great problem just so long as we retain in our hospital training-schools young women who will not awaken to a

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