

## Private Nursing in South Africa.

By MISS HENRIETTA KENEALY.

Some eight hundred nursing sisters—more or less trained and experienced, hastily enrolled into the Army Nursing Service Reserve—went out to South Africa during the Boer War. I think of these I met in personal contact quite three hundred, so that I had opportunities of hearing their views on nursing in South Africa.

For the most part they disliked the country very thoroughly—even without giving it a fair trial. After the first year, at some of the military hospitals where work was slack and recreation in full swing, there were Sisters who hardly ever went on duty. One I have in my mind, was champion tennis player at home and chief bat or whatever the leader is called, on the cricket field in Maritzburg. And the Superintendent very judiciously kept her at such occupation.

These nursing sisters objected very much to life in South Africa, chiefly because it was not what they were used to. They resented the idea of houses built bungalow fashion, with no upstairs. And they naturally disliked Kaffir servants, whose language they could not understand. Not a few objected, like the Tommies did, to "beastly tinned food," and the primitive way in which most food was served. And they forgot there was inclement weather at home, and were aggrieved by the heat, by the cold, by the dust, by the flies, by the hot winds, and by everything Colonial.

That was in South Africa.

Settled at home after their return, they seemed to forget the objections in time, and to remember the freedom of life out there, the irresponsibility of the people, the apparent absence of supervision by Mrs. Grundy, as well as sports and pastimes, travel and sea voyage, and the novelty of the whole experience, which was very great to girls, many of them from remote country towns and Scotch villages, girls who may never have gone farther from home than to their schools and their training hospitals. These ladies have since given accounts of nursing in South Africa that have sent in large numbers English nurses crowding to the Colonies.

Well and good—they were welcome. Educated women with trained minds and skilled hands make for the good of the Colonies, and they may have a fairly contented life for themselves.

But Australia has also sent a large contingent of nurses during and since the War. That, it seems to me, is not so well—for South Africa. The Australians can always take care of themselves. Australia must be, as is said of a portion

of Great Britain "a gran' place to live out of," so many of its people flock to South Africa. And Australasian nurses are apt to cut the ground from under English feet. They are more used to "roughing it," and, not having our traditions and conventionalities and systems of etiquette "they do not mind things" that jar on English women terribly.

Without being so well trained or so conscientious in their work as English nurses, those from other Colonies know the market, and the methods of the market-place better than we do, and so they have the advantage in the struggle for Colonial existence.

Another factor to be taken into account is that South African hospitals choose English Matrons and Sisters, who are raising the standard of training. I cannot myself imagine conditions of life out there, nor any environment that could produce a hospital like, for example, St. Bartholomew's, with its perfect proficiency in nursing, and its military exactitude and discipline. I do not believe it is in the Colonial character, with its good-tempered, happy-go-lucky carelessness, and its cheerful, grumbling acceptance of the second best in everything, to attain to such a standard.

But the Colonial hospitals fit the local nurses for the work in the homes of the people; they understand the language of the Kaffirs, and not having what is known there as the "Exeter Hall" notion of the native, Colonials can get more work and more civility out of Kaffir servants than we can.

The nurses on the A.N.S.R. knew nothing—how could they?—of the points for and against private nursing, or of the difficulties facing a stranger. They were sent out by the War Office, passages booked and expenses paid, and every instruction and facility given for embarking and landing. In effect, they reached their destination in South Africa with as little trouble to themselves as though they had been sent out by parcel post.

Arrived in the country, they were despatched to a paternal Principal Medical Officer, who, with the Sister Superintendent, took charge of them, and deposited them in their different stations. Not the most feeble person, nor a stranger from the back of beyond, could have lost her way or gone astray if she had tried to.

On the other hand, nurses going out on their own account have everything to provide for by themselves, and unless booked for a fixed appointment, the element of chance and risk will enter very largely into their future.

I am most unwilling to say anything to deter enterprising nurses from taking those risks and chances—but there is more in it if one does not

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