

THE "BOSSSES" OF THE ROYAL BRITISH
NURSES' ASSOCIATION.

The *American Journal of Nursing* has the following comment on the recent proceedings at the meetings of the Royal British Nurses' Association:—

"It is really enough to make one tear out one's hair by the roots and to despair of womankind to read the recent proceedings of the R.B.N.A. The narrow-gauge men whom these women have been foolish enough to elect as officers, and whose tactics are those of the political "boss" are determined that there shall not be a fair representation of nurses on the Central Board under State legislation. Next month we will give a little more space to this matter.

In this country the accepted principle of State examination is that the persons who train shall not also examine and pass their pupils, but that this shall be done by an impartial body—viz., the members of the whole profession, whatever it is. But this is too impersonal and democratic for the bosses of the R.B.N.A., hide-bound in traditions of privilege, and scared to death of nurses forgetting their place and having something to say about their own affairs. It is really a pity that the R.B.N.A., ever changed its mind back again for Registration. But the Society for State Registration is still there."

Midwifery in China.

Miss Ethel Halley, Matron of the Shantung Road Hospital, Shanghai, writing in *Una* of her experience in China says:—"Coming straight from our dear old Women's Hospital, Melbourne, I was full of aseptic notions and wanted, nay expected, to teach all and sundry of the natives whom I came across the same. How was I doomed to disappointment and disgust."

It is native custom for the very oldest and dirtiest things to be used for a confinement. What is the use, they argue, of anything clean when it will so soon be dirtied. "No man," says Miss Halley, "attends a Chinese woman, only a midwife, compared with whom the most atrocious of our home Gamps is an angel of cleanliness and skill and common sense. This atrocity in human form guarantees to bring the patient safely through, otherwise she gets no pay. Frequently when the patient has undergone ill treatment at her hands for several days and is just about at the last gasp, someone suggests 'the foreign hospital,' thus we get such cases as home nurses can have no conception of."

Midnight Musings.

Who has summoned from the deep
Phantoms to disturb my sleep?
Who has chased my wearied soul
Through troubles far from my control?
Who has raised night's purple veil
And bid my longed-for slumber fail?
What cruel spirit can it be
That so harshly deals with me?

It is a most extraordinary thing, but just about the time when I ought to be pulling up the bedcloths and going off to sleep, all sorts of good ideas come into my head—nice little reforming rules and improvements for the hospital; happy little notions for articles for you, dear Editor; outlines of interesting foreign letters to friends; to say nothing of hosts of good resolutions. The amount of planning I do at night is simply marvellous. Fancy, if all these good resolutions were carried out, these interesting articles written, these new rules came into force! My friends would think that I was ill; my nursing staff would be bewildered with the sudden array of new virtues expected of them; whilst I should receive a stern hint to the effect that THE BRITISH JOURNAL OF NURSING was not published solely to afford an outlet for the results of my insomnia. It is good to pass one of those happy wakeful nights, when all things seem possible to you. As you lie musing, you touch heights you will never really scale, finish work you are fated to leave undone, express for once thoughts, for which in the daytime you have no words. You look back at what you have accomplished and behold, it seems good in your eyes, you look forward and you see success. Night is kind to you and when at last you sink asleep, the gates of ivory roll open and send you happy dreams to match your waking thoughts. The pity of it is that peaceful sleepless nights should be so freely interspersed with those—which can only be frankly described as "quite otherwise."

And a Matron's life lends itself peculiarly to the uncomfortable process of thinking things over in bed. In common with hundreds of other fellow-sufferers I own that extremely awkward possession, a conscience—a midnight conscience—or perhaps I had better call it a very matutinal (Editor, please alter if incorrect) conscience. I tuck myself comfortably into bed somewhere between 12 and 1, at peace with myself and the whole wide hospital, blow my candle out, and go to sleep easy and happy, sure of a good night at last. Then about 3 a.m. I wake with a start, either a baby in the distant children's ward demands its bottle too per-

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