should be left unfettered to select her own council." The Marquis of Lansdowne seconded the resolution, and moved "inat the noble exertions of Miss Nightingale and her associates in the hospitals of the East, and the valuable services rendered by them to the sick and wounded of the British forces, demand the grateful recognition of the British people."

Mr. Sidney Herbert supported the proposition, and urged that Miss Nightingale should be left free to direct the school, for "in her we have a woman of genius."

It may be imagined by those who do not know the complacency and satisfaction with existing conditions which institutional life appears to engender, that, considering nursing conditions in hospitals at that time, and the splendid demonstration of organising capacity given by Miss Nightingale in the East, that none would have welcomed the scheme more warmly than the medical staffs of the large London hospitals, but we read :-- "Strange as it may seem, the majority of the medical men of the day appear to have been, if not distinctly unfriendly, at least far from cordial supporters of the proposed plan, and those who had been directly concerned with the management of the nurses under the old system regarded the new one as a sort of an affront. Such, at least, was the asser-tion of Dr. South, who wrote a pamphlet adverse to the projected Nightingale School. Dr. South was senior surgeon at St. Thomas's Hospital. He was probably quite of the old school, liked to have his nurses on the plane of domestic servants, was patronising and kindly disposed to those who served him, and not too exacting in his own requirements. . . He defended the old-fashioned nursing system as excellent and satisfactory; quirements. warmly defended the character and conduct of the Sisters (barely mentioning, however, the servant-nurses, with whom he probably did not come in contact), and gave an account of the work of the nurses and sisters, and the way they were trained.

"The training of the Sisters, and the general control of the nursing work, had been entirely in the hands of the medical staff. This is an important point to notice, and it was, no doubt, reason enough for the resentment felt by medical men at the proposed change. The Sisters were not taught by the matron, but by the surgeons and physicians. . . . Either nurse or Sister might be called upon to remain on duty all night after a day of fourteen hours, during which time, the writer adds, incidentally, they 'rarely sat down for five minutes.' He then considered the proposed meeting at Willis's Rooms to promote Miss Nightingale's plan for teaching nurses, and declared that the proposed school was quite unnecessary and superfluous; that statements made as to the nursing inefficiency and bad conditions in hospitals were offensive and untrue; that Sidney Herbert's words, 'It was hoped that through Miss Nightingale's proposition nursing would be raised to a pitch of efficiency never known before,' were not founded on fact—that hospital nursing was not only efficient but was satisfactory to all the physicians and surgeons. He wrote further :-- 'That this proposed hospital nurse training school scheme has not met with the approbation or support of the medical profession is beyond all doubt. Among the signers of subscriptions to the Nightingale Fund, out of ninety-four physicians and seventy-nine surgeons from the seventeen hospitals in London, only three physicians and one surgeon from one hospital, and one physician from a second, are found among the supporters of the scheme.'" It was ever thus. We seem to hear the authorities of the 'great London hospitals' of to-day proclaiming their attitude on the registration question in these echoes of the past.

## SOCIAL DISTINCTIONS.

Commenting on the social distinctions which for bationer,' and 'servant class,' are found on every page of English nursing history even late into the present time. As a result, the nurses of Great Britain have constituted a vertical instead of a transverse section of society. This has been from one standpoint an advantage, for there have always been women of the highest education and social class at the top to take hospital positions, district nursing work, army nursing work, and to direct and organise. But it has been a disadvantage from another point of view, for it has definitely hindered intelligent and loyal organisation among the nurses themselves . . . and so has clogged the feet of the more public spirited members of the nursing profession, who, early discerning the higher views of intelligent citizenship as obligations of a trained body of workers, have not ceased to aspire to a higher educational and industrial plane.'

The authors consider that "the greater natural dependence of this class may have been one of the reasons why the earliest English schools after St. Thomas's established their own private duty homes, where their nurses, after completion of their hospital service, were expected and encouraged to remain . . . actually a part of the outfit of the institution to be rented out as one rents utilities."

## PROFESSIONAL ORGANISATIONS.

There is a life-like sketch of Mrs. Wardroper, who for so many years was Matron of St. Thomas's Hospital and the Nightingale Training School for Nurses. Her opposition to the foundation of the British Nurses' Association-designed to bring nurses from all schools together for mutual



