insurance tax, and to avoid doing so they will get nurses through a middleman who is compelled to pay it. Thus independent professional co-operation will die out and a private nurse must either work "on her own" as a midwife does, and be exempt, or pay more for her work. It just comes to that.

A nurse at the London Hospital practically pays about 50 per cent. for her work, and the  $7\frac{1}{2}$ computation for which nurses in co-operation could in the past earn a fair income, will have to be raised now that the Government has passed two Insurance Acts-the Employers' Liability Act and the National Insurance Act-which compels them to pay for both, although they may only draw a few shillings from one at a time ! We quite agree that patients will not be worried stampsticking for private nurses, and that should a society arrange for its nursing staff to take the threepenny cards with them that society will soon lose custom. We learn that many large business concerns are putting on one per cent. on the cost of all goods, and in consideration of the fact that insured persons will have to pay more for everything they require, sooner or later the public will have to pay more for its nursing as it will have to do for other necessaries. But just here we find the tooth-print of injustice. Trained and skilled nurses, unlike the medical profession, midwives, and pharmacists, have no legal status (and therefore no direct representation on the Advisory Committees in England and Ireland under the Act); so that they can be under-sold, as they are, by all and sundry who put on a cap and apron and pose as trained nurses. They are therefore unable to protect themselves. Does not our degrading position under the Insurance Act drive home the lesson of how helpless a wage earner is without a vote ? . How impossible to rise out of the slough of competition and exploitation without Registration and legal status ?

Trained nurses not only add greatly to the economic stability of the State, but enormously to the well-being of the community. What does the State do for them in return. Absolutely nothing. And why not? Because men hold cheap-and legislators in contempt—unenfranchised workers. And, frankly, what is the position of the unenfranchised wage-earner ? Without doubt, the position of the slave. The self-supporting, either male or female, must have political power to be recognised as citizens-and woe betide the women who, without it, depend upon their own exertions for support: sooner or later in the economic struggle their class gets pushed down lower and lower; and it is thus we manufacture the class whose bodies are their only asset. Therefore let us fight with might and main for the only powerthe political vote—by which we can save our souls from the pit.—ED.)

## **REPLIES TO CORRESPONDENTS.**

We regret that we have not space to insert several lengthy letters received on the same subject. They contain questions: (I) If I evade the law, how can I be punished? We do not think the Act provides for your punishment—if you are a *conscientious resister*: you must not be merely *contumacious*. We can't explain the difference.

(2) If with emoluments I earn  $\pm 160$  a year need 1 insure? No, but you will then have to pay income tax. Where insurance tax ends—income tax begins.

(3) If unmarried women insured in the same society have illegitimate children is it true I have to help to pay the maternity benefit? Yes—the maternity benefit, 30s. per birth, for illegitimate children must all be paid by respectable insured women. There is no provision for paternal responsibility for unmarried fathers. A clause, of course, should have been inserted in the Act making it compulsory upon the grant of an affiliation order that the maternity benefit should be refunded by the father's society to the society in which the mother of his child is insured. This is one of the strongest reasons why a highly moral class like trained nurses should have their own Approved Society.

Miss M. Thompson.—Write to the Hon. Secretary, Trained Women Nurses' Friendly Society, 431, Oxford Street, W., for a proposal form.

Miss A. Donald.—Nursing in Homes in British Columbia differs considerably from that in this country. We should advise you to write in the first instance to the Lady Superintendent of the General Hospital, Vancouver, asking her for information as to the best methods of getting into touch with the work you desire. We are glad to know that you find this journal helpful.

Canadian Born.—Write to Lady Superintendent, General Hospital, Winnipeg, Canada. Conditions of living are so different, we feel sure you are wise to wish to train in Canada, if you intend to work there.

## OUR PRIZE COMPETITIONS FOR JULY.

July 13th.—What are some of the complications to be watched for during pregnancy, and their causes? Mention methods you have seen used to combat them.

July 20th.—How should a specimen of urine be prepared, and how examined ?

July 27th.—What are the common sources of bacterial infection ?

## NOTICE.

## THE TRAINED NURSES' FRIENDLY SOCIETY.

Miss Mollett, Hon. Secretary, will be at 431, Oxford Street, W., daily, and will be pleased to give all information possible to those desiring to join a Friendly Society of *profes*sional nurses.



