

breakdown of a matron from overstrain, one generally finds that woman has a tender public conscience, and that conscience has not received the appreciation from her employers that is her due.

The overstrain of hospital matrons in the country is a common practice, and needs consideration and prevention.

I am,

Yours truly,

FORMERLY ONE OF THEM.

MIDWIFERY IN INDIA.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—I note in the current issue that the Lady Superintendent of the Eden Hospital for Midwifery, Calcutta, which is one of the three recognised by the C.M.B. in India—the others being the Sir Jamsetji Jijibhai and the Cama—has asked the C.M.B. to reduce the number of personal deliveries required from 20 to 10.

I am simply aghast. In Bombay, among the recognised training schools, the Bombay Presidency Nursing Association has gone one better than the C.M.B. and requires 30 personal deliveries. Why? Because doctors, superintendents and committees recognise that the national standard of education and moral responsibility is not in India what it is in England, for many reasons unnecessary to go into now, and that longer training in all branches rather than *less* is what all of us on the Superintendents' Association and Trained Nurses' Association of India are fighting and unceasingly working for. It is doubly hard when those who should be leading the way, or at any rate, strengthening our hands, help to pull down the strongholds we have won, often at the expense of health and strength, and through bitter days and years of opposition.

There is one consolation, and that is that for once Britain has stood by us in the "Standards Struggle," but then midwives are *registered*, while we experts of three years' training in Nursing, and years of specialising after, are only fit to be classed with charwomen.

I can only add that our affiliation in India with the International Council of Nurses has raised my enthusiasm, hopes and expectations on to an infinitely higher plane, and I hope to return to India in the autumn after a very severe illness which has not taken one ounce of fight out of me, to go on quietly, perhaps very slowly, with our little band of faithful ones, but with a heart aflame to help to right the wrongs of the nursing profession in India or wherever one may find oneself.

Yours sincerely,

S. GRACE TINDALL,

President Trained Nurses'
Association of India.

PROMOTION TO SISTERS' POSTS.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—I should like to draw your attention to the comments on the promotion of nurses to the position of Sisters in their training school, at the Macclesfield Infirmary (page 532) in the last issue of THE BRITISH JOURNAL OF NURSING. The facts are not quite as your correspondent states.

The suggestion made was that the present Theatre Nurse be appointed Sister, and a nurse who has recently completed her training should be appointed Staff Nurse in the Theatre.

Previously our nurse in the Theatre has always been appointed from our own staff on the completion of her three years' training, to work under the supervision of the Matron.

I think you will agree with me that it is only fair to give a good nurse this experience if only for six months, before leaving her training school, as the experience is so valuable for a nurse to have before taking a post in another hospital.

This arrangement has always given satisfaction to all concerned, and the nurses have obtained posts where their Theatre experience has been most essential and valuable to them.

I am, dear Madam,

Yours faithfully,

N. DREWITT, *Matron*.

General Infirmary, Macclesfield.

[We entirely agree with our correspondent that it is desirable to give as many nurses as possible experience in the operating theatre, before leaving their training school to take up other work. But this scarcely touches the discussion by the House Committee to which we referred last week, which was whether a nurse should gain experience elsewhere before being promoted to the position of Sister in her own school. We are inclined to think that is always desirable, and certainly in the case of one trained in a small hospital, otherwise the outlook of the Sister, both on professional and on general matters, tends to be circumscribed.—ED.]

REPLY TO CORRESPONDENT.

Miss James (*Bedford*).—You can use your time usefully before entering a hospital for training by getting an insight into the social conditions of the people, as for instance, through systematic work in connection with the Charity Organisation Society. Nurses, especially those who intend to take up district work and school nursing, can scarcely have too wide a knowledge of the social conditions of those amongst whom they will have to work.

OUR PRIZE COMPETITIONS.

July 12th.—What precautions would you take in nursing a suspected case of syphilis?

July 19th.—Enumerate the different means of reducing fever.

July 26th.—How would you feed, and what means would you take to relieve a patient with an acute attack of indigestion?

[previous page](#)

[next page](#)