BRITISHJOURNAL OF NURSING

THE NURSING RECORD

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∿ი. I,866

JANUARY, 1924.

Vol. LXXII.

EDITORIAL.

NURSES KEEP YOUR SOULS ALIVE!

If, as we know on the highest authority, it is profitless for us to gain the whole world if, in so doing, we lose our own souls, it follows that it is worth while to forego present advantages, if that is the price demanded for saving one's soul alive; that unearthly essence which defies torture and time, which has sent martyrs to the stake, unconquered and unconquerable, because they realised that if only they were true to the best that was in them, the brief agony of their passing was indeed the Gate of Life—the life of the immortal soul.

The reason why the British Journal of Nursing stands apart in this country is that it is edited by a trained nurse, with the object of giving her colleagues a free voice in the press, in contradistinction to papers which, as commercial speculations, the property of the laity, are primarily managed for gain. Consequently, when the professional interests of nurses, and the financial interests of newspaper proprietors, are in conflict over some matter of principle, the interests of the nurses are submerged.

It has happened frequently in the past, as it will no doubt happen again in the future, that the British Journal of Nursing has been alone in protecting the economic and professional interests of nurses, because its policy has been to be true to the best, and to save its soul alive.

The work of a nurse may be the highest or the most sordid. Her selflessness and altruism may transform common tasks into actions of the finest quality; may so develop her that the sick turn instinctively to her for service, for support, for comfort.

Or she may be selfish, dealing out her service to the sick in terms of pounds, shillings and pence; and though they may, perforce, submit to mechanical service and skilful manipulations at her hands, these leave them unsolaced and uncomforted, for their souls as well as their bodies cry out for consolation, and this she is unable to give.

Again, nursing work must degenerate if members of our profession have no power of self-determination and self-protection. The extreme danger to nurses of the combines of medical men and the laity, on the Council of the College of Nursing, Ltd., and the General Nursing Council for England and Wales, is that the more subservient nurses submit to be tyrannised over, instead of claiming their right to self-determination, because they consider this to be to their individual advantage, and so, not only do they hurt their own souls even if they save them alive, but they injure the whole Nursing Profession, whose honour and interests it is their duty to uphold.

THE MINISTRY OF HEALING.

The report now issued of the Committee appointed by the Archbishop of Canterbury in accordance with resolution 63 of the Lambeth Conference, 1920, "to consider and report as early as possible upon the use, with prayer, of the Laying on of Hands, of the Unction of the Sick, and other spiritual means of healing," has deep interest for trained nurses, who are concerned with all methods of healing of benefit to the sick.

The report states that the Committee decided there were three main heads under which they should approach their task: (a) The historical question—i.e., the evidence for what is called the Ministry of Healing, and the precise character of such a Ministry, if it existed; (b) a comparison between the different methods of healing, and the consideration of their relation to Christian thought; (c) the question whether a Ministry of Healing should now be recognised and sanctioned.

The historical question is dealt with in a Memorandum written by Canon Mason, in consultation with the Dean of Wells. It is indisputable that the practice of calling in the elders of the Church to pray for and anoint the sick with oil, goes back to apostolic times, and has the authority of St. James, nor has it ever entirely fallen into disuse as an "outward and visible sign of an inward and spiritual grace."

The Committee say with truth that religious treatment of bodily illness must be related to other methods. Let us be grateful—some of us feel we can never be grateful enough—for the skill of physicians and surgeons, but, further, religious treatment aims at the restoration of the patient's whole nature. This double distinction must be borne in mind throughout. The power which heals the body makes use of three avenues of approach: (1) Material, as surgery, drugs, diet, etc.; (2) psychical, as suggestion and different forms of mental analysis; (3) devotional and sacramental. "Spiritual" healing may be said to be that which makes use of all or any of these factors in reliance upon God. And, in all these methods of healing, faith is, or may be, an important element.

We all know the influence which a mind at ease has on physical recovery; that some patients who may be expected to progress do not do so because of an unknown disturbing factor, and a nurse can help materially in discovering this factor, and in securing the appropriate remedy. Again, some nurses have preeminently the healing touch, while others, technically perfect in their craft, still fret and jar their patients.

We rejoice to see a Committee composed of clergy and distinguished medical practitioners co-operating together to discuss the Ministry of Healing, for each has much to gain from the other. Lastly, while theologians, rightly, debate what is de fide, be it ours to demonstrate daily the power of the Ministry of Healing.

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