

Why Nurses Break Down in Health.*

BY MRS. HUGHES.

I THOUGHT of suggesting another title for the collection of remarks to be contained in this Paper, "The proper care of a Nurse's health by herself and others," but it seemed to me too much like saying "It is the Nurse's own fault if she breaks down"—a statement I much disliked when I was a Nurse. Possibly I disliked it because it was partly true, but not entirely; and now that I am no longer actually engaged in Nursing, and can look at things from an unbiassed point of view, I want to bring into notice some of the difficulties under which Nurses labour, and which tend so much to shorten their professional lives, to cause in a great measure personal suffering, and make them a burden to others when they no longer can work. With confidence that you will listen to my suggestions, and, in the discussion afterwards, advance some others, I begin a subject which should, to such an audience, prove important and interesting, and I hope will also sow the seed of some much-needed reforms. I feel deeply the honour that is done me by your Committee in asking me to give one of your Sessional Lectures, and the knowledge that my experience of Nursing has been an unusually varied one gave me confidence to accept the proposal.

I should like to tell you in a few words my history so far as it bears on this point. I was trained as a Nurse first of all in a Hospital for Children for two years, then in a General Hospital, and finally spent two years in a Private Hospital. Having thus procured a good grounding in general Nursing (surgical, medical and fever), and having also had some practice in the care of mental cases, I then became for two years a private Nurse, and finally for some twelve months or more I was a Lecturer on Home-Nursing under the auspices of the Technical Education Act.

In one of those lectures entitled "Duties of a Nurse," I began by saying that her first duty was to keep herself in good health, otherwise she would become of little or no use to her patient. This was to be done by leading a regular life, with sleep, food and fresh air in such proportions and at such intervals as would be found necessary to produce the desired result.

The people whom I addressed in this strain were for the most part mothers of families, who would naturally do the Nursing in their own homes. Trained Nurses require the same rules to be carried out, and the abuse of their health requires serious consideration by us all, and there are some points worth mentioning before I sum up the reasons why Nurses break down in health.

To begin with the question of sleep, as I mentioned that first on the list of necessities. In a well-ordered Hospital, the rules about hours allotted for sleep are peremptory for both day and night Nurses, and, if adhered to, leave little to be desired or reasonably complained of. In private Nursing it is very different. The Nurse takes with her a copy of the rules in which it is desired that she shall have 8 hours consecutive

rest, but, alas! how seldom can she insist on it. I could tell you many instances where a Nurse, if she wished to do her duty by her patient, could not absent herself, but one will suffice.

I was once sent to nurse a boy suffering from acute peritonitis, and was with him for nine weeks. When he was convalescent, his friends were anxious for me to remain longer, but I was so worn out I was obliged to leave, and was unable to nurse again until I had had a month's rest. Why? Because the people of the house could not afford two Nurses, and yet not one of the inmates would undertake such work as applying fomentations and giving injections of food. So, after remaining up all night, my rest was continually broken all day (for everyone knows how much depends on these things being done regularly).

Again, when two Nurses are employed, and by working loyally together contrive to get the allotted time for sleep, how very often do we find the abominable Box and Cox arrangement of the same room and one bed provided for both. The bed is probably *made*, but what time is there for it to be aired? I once heard a lady remark that "really, Nurses were always eating or sleeping." Did she, I wonder, ever think what they were doing whilst she was sleeping? and not only just then, in her house, but week after week, year in year out, by *someone's* bedside. It is *this* that breaks us down—the weariness of it.

2ndly. *The food question.*—We should have wholesome food, and regularity in the serving of it. Complaints are unpleasant, and Nurses are shy of making them about food; and sometimes abuses go on just because the person in authority does not know of them. Much might be done to make food more palatable, for, remember, there is a great deal in a Nurse's work to make her squeamish. For instance, in one Hospital I was in, tea, butter and sugar were served out in weekly rations, and were carried backwards and forwards by each Nurse every day, if she wished to have such luxuries for breakfast and supper. Never were there such close friends as that butter and sugar! for, after being in the ward all day, they reposed in one's bedroom all night. Would so much more butter have been eaten if it had been on the table? or would the Hospital have been ruined if the butter bill *had* grown?

Many other things also do not require reform in quality or quantity, but merely to be made more appetising. And one plea I must make for Special Nurses (that is, Nurses engaged in Nursing isolated cases). Only those who have tried it know *quite* how disgusting, food can become when eaten under the shadow of a carbolic sheet, or, worse still, in a room redolent of iodoform.

The room where meals are eaten should be away from all this, and care taken that it is well aired between meals. It is an unpleasant consciousness to feel certain what the last meal has consisted of from the odour remaining in the room.

In Hospitals, the time at which meals are served is arranged to suit the general work of the wards, and the regularity is decidedly a gain, almost as important as the food itself.

Variety in food is what we crave for. I remember, at one time, our Nurses' sickroom was overfull, all the inmates suffering from gastritis or indigestion in

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