

now is, not to change at once all the conditions of our training, and work with which we are dissatisfied; not to fix at once a final and satisfactory standard of excellence; not to establish immediately a complete and perfect curriculum of study, but to so unite and fraternise all the best of our profession that they will learn to stand together, move together, work together. Then in the future we may safely expect them to progress in the right direction, to acquire influence, moral dignity, and force as a body, and to undertake successfully the solution of those varied complications which we can now see time and circumstance are first bringing into nursing questions.

It does not seem as if there was any real ground for faint-heartedness over our outlook. The record of what has actually been done by other bodies in other lines of work forbids it. I would suggest that those who are dubious or unbelieving, study the history of, say, the better class of Trades Unions, the work of the Women's Christian Temperance Union, of the Federation of Women's Clubs, of the Association of Collegiate Alumnae, of those associations which unite the members of the different learned professions, and I believe their doubts will be dispelled.

Of all the organised bodies about us, the one to which we would naturally most closely conform in general outline is the American Medical Association. Founded in 1846, it was at the outset framed broadly, as was not only advisable but necessary. A rigidly exclusive Association could not then have represented the whole medical profession, but must have failed in its purpose, which was to furnish a leaven for the whole, not only to separate from the rest the small portion already leavened. With no such thing in existence as government control or guardianship in educational matters, and with the rush of settlement in a vast new country, a thousand pressing and instant necessities ran away with standards for the time being. A crop of Medical Schools sprang up like mushrooms, unfurnished and unendowed, but the best that could be had at the moment. The foundations of the American Medical Association were laid with stones that would be rejected to-day. The lines loosely drawn then are now being tightened year by year. Standards first fixed at what was possible, are being brought up to what is desirable. Year by year, now in one State, then in another, the influence of the Medical Association has been bent toward securing better conditions. It is a mistake to suppose that the Medical Schools as, such, have been the leaders and the standard bearers of the medical profession. It is notable that reforms and advances in schools of medicine have

come as the result of unceasing pressure brought to bear by the profession through the Medical Association; they have not originated with the Colleges and Universities. The schools do not precede the profession in the march of progress; they are lead and urged on by the concerted purpose of the organised profession.

The Association worked steadily, first for better preparatory requirements; then for a lengthened term; a lengthened course; a year added; then another; then better post-graduate work, and so on: also in the States it laboured to secure the passage of beneficial laws. In looking over its ordinances you will find resolutions on the order of this one, which I quote at random, "Resolved, that the faculties of the several Medical Colleges of the United States be recommended to announce explicitly in their annual commencement circulars and advertisements that they will not receive certificates of time of study from irregular practitioners, and that they will not confer the degree upon any one who may acknowledge his intention to practise in accordance with any exclusive system." And of this: "Resolved, that each year, until otherwise ordered, the President-elect and the Permanent Secretary shall be directed to appeal in the name of the Association to the authorities of each State where no State Board of Health exists, urging them to establish such boards."

I have gone over this ground, because I believe that in certain features there is similarity between the medical and the nursing worlds, and to illustrate the suggestion that a full study of the history and transactions of the American Medical Association would be most instructive and helpful to us in working out our own.

The plan of organisation of the American Medical Association is roughly as follows: The National body is composed of delegates, invited members, and permanent members. The delegates are sent from State societies and from local Societies which are recognised by representation in the State Society. Members by invitation are reputable men from districts having no representation, being vouched for by a certain number of members. They have no votes. The permanent members are all those who have at any time been sent as delegates. This provision for permanent members has manifest advantage, and would be a good point for a Nurses' Association to imitate. They remain members while in good standing with the local body which they first represented. They also have no votes. The National Association drew up the code of ethics, the "Ten Commandments" of the medical profession, the acceptance of which is obligatory upon all members.

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