

for a longer time they may get a better training ; or else, that by binding themselves for five years we might be ready to take them without a fee. This, I know, is done by nursing institutions. I train for two institutions, two years in the infirmary for general nursing, to be followed by six months in a fever and six months in a maternity hospital. A nurse who has made good use of her opportunities under these circumstances will not be at a loss to meet almost any emergency which may arise.

Every day, doctors are coming to realise more that the assistance of a trained nurse is not only advantageous to their patients but also a help to themselves, because she may be relied on to carry out a course of treatment without their having to do more than give her directions ; but, as yet, in the provinces special training is an exception rather than a rule, but before long, I feel sure, it will be insisted on especially when the older generation of doctors has passed, and a generation has risen in their places who have been accustomed in their hospital practice to rely on trained nurses.

The public will certainly ere long ask invariably "What experience has the nurse had in this form of illness?" and it will be necessary to satisfy them in this respect.

As to the question of mental nursing, which is coming so much to the front just now, I must speak entirely as an outsider, since I know nothing by experience of its practice and rules, and can only form an outsider's opinion. *This* I am sure of, that as long as Asylum Boards advertise for "attendants" instead of for probationers, or for trained Mental Nurses, so long will it follow as a matter of course that those who apply for the posts will belong to a class lower in the social scale, and less educated, than the generality of those working in the general hospitals. I am quite of the opinion that the nursing of the sick in mind requires better trained and more disciplined service than is required for the sick in body, but up to the present time, I fear it must be admitted, that in most cases the service has fallen far below the standard of the average ward nursing. But there are evident signs in the better organised asylums, that they are endeavouring to improve the style of nursing, and the class also of those who attend on the sick. Two hindrances to this most desirable end exist. One is, as you may easily prove by following the reports in the medical papers, that their nurses are attempting to enter into competition with fully qualified general nurses, without having the full qualifications ; this is I believe equivalent to a dentist acting as medical practitioner, and is utterly to be condemned. To take up mental nursing, after a general training, is to devote whatever gifts or powers a nurse may have to a most arduous brand of the profession, but we are bound

to protest against irregular modes of obtaining certificates for nursing, as being back doors, to which all duly qualified practitioners object, to whatever profession they belong.

One other obstacle is to be found in the fact that in most Asylums the female nurses are under the control of the male medical officers. So far back as 1863, Miss Nightingale protested against such an arrangement in the general hospitals. I quote from her "Notes on Hospitals," page 187 : In case 4 where one secular (as opposed to religious) male head is over nurses and hospital, she says :— "There is a somewhat higher average care of the sick, and no morality at all, but an awful destruction of both life and soul, among nurses where both nurses and hospital are under the same secular (male) authority." The words are so strong that I dare have quoted no lower authority than Miss Nightingale, but they are none the less true.

All good ends can only be obtained by slow and steady progress. We have seen an abnormally rapid growth in the nursing profession ; we must not be impatient if the branches seem to be trying to outtop the original stem. We know the branches cannot do without the parent stem, and all growth in *it* raises them ; let us try, therefore, to help to strengthen those branches by inducing our probationers whom we have in training to go on and qualify at least in the special branches of fever and maternity nursing (the latter branch I have not been able to discuss, as its many sub-divisions would have made my paper too long). By this course we may hope equally to benefit the Nurses and the Hospitals, and we secure that a proper groundwork is laid, on which to build up special training : at the same time I would absolutely object to the degrading of our Nursing Certificates, which must necessarily follow, if an equivalent could be obtained by six or twelve months nursing in the wards of a Lunatic Asylum. A certain amount of jealousy in the different branches, if properly directed, may produce good results, by urging us all to renewed efforts to place our own schools and work on a better footing, and I, for one, should be very sorry if we were to rest satisfied with what has been done in the past, there is always room for improvement, but the advice given in the old Italian proverb will hold good even in the close of the nineteenth century, "Hasten slowly." Let us go patiently forward, always making sure that our work is solidly and well done, progress then is certain, whether we get blamed or praised for it. As nurses we have been taught always to hope for the best, and never to lose patience, even though it may be often tried, and if we, who are bound together for the good of our profession, keep its higher aims in view, we need not be afraid of any opposition, for what is right and just must eventually succeed.

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