

in the service of humanity. Thirty years ago it was the exception for a woman to adopt a profession from choice, and Miss Nightingale by her example, by her pen, and by her voice, unwearingly urged her fellow women to help her to regenerate one of the noblest professions a woman can choose—that of intelligently and skilfully tending the maimed and helpless.

The standard of nursing at many a London and provincial hospital in the sixties, some of us can remember, Sarah Gamp and Betsy Prig were realistic sketches of their period. A man who is now one of our leading surgeons has related to me his early hospital experiences in London, and how he himself would sit up all night and tend a critical case, rather than leave his patient to the tender mercies of some ignorant old woman sent in from the neighbourhood to look after the ward during the night.

In 1860 but few professions were open to women, and but little higher education or technical training available for girls. Just consider one moment the wasted lives and unhappy marriages resulting from such a condition.

In 1899 the position is altogether different. No longer have we to complain of a dearth of women eager to take up the profession of nurse. Every hospital and every training school has its list of names waiting for a probationary trial. Speaking from personal experience in Greater Britain, the present danger to nursing as a profession seems to lie in quite another direction. Take a family with several growing up girls. One is a home daughter; others studying for medicine, for law, for journalism, for art. One of their number is less strong, physically, and is, perhaps, also less clever than her sisters, and the family decides, "Oh! she will do for a hospital nurse." This is the point at which we have arrived to-day, and here it is, that we older women—many of us looking wistfully back to the happy memories of our active nursing days—should help with ripened experience to raise the standard and assure the status of our much loved profession.

This, I think, leads to the first point for discussion, "The Standard of General Education and Age of Probationers." The tendency is to allow girls to undertake hospital work too young. Twenty-four is early enough, and twenty-nine late enough, to enter as probationer in a large general hospital, and twenty-one in a children's or country hospital. This does not mean that the interval between leaving school and entering for the nursing profession need be wasted. In England every girl has opportunity at her doors to widen her mind by attending lectures, learning languages, or joining technical classes. Schools of cookery and for domestic instruction are scattered over the land. One who intends to rise in her profession

as nurse should take care to equip herself with the best educational grounding attainable, and with practical knowledge learnt in some occupation. It is all part of a training that will prove invaluable to her in the future, either in hospital ward or as private nurse. Hospital routine has a narrowing influence, and no trained nurse ever regretted having enlarged her horizon by learning some subject thoroughly in her early life. Now that there is no dearth of applicants for hospital training, surely the time is ripe to urge Matrons to make use of a higher general educational test to weed out the less fit. Every girl, nowadays, be she domestic servant, lady help, governess, or merely idle in her father's house, has opportunity to acquire some branch of knowledge. Coming from Australasia, it seems to me that in this Mother Country advantages and opportunities offer themselves on all sides. Such opportunities for girls as thirty years ago were beyond our most idealistic dreams. Personally, I strongly advocate a simple test examination by the Matron before entering an applicant's name on the list. Intelligent reading, arithmetic as far as decimals, simple composition, together with proof that the applicant has studied some one subject definitely. As regards "Preliminary Professional Training," I hardly know how that can be achieved on any large scale at present, and am hopefully waiting to hear to-day something about it from our American friends, for America seems to be the only country where the art of nursing is placed on a straight-forward professional footing. To quote again from Miss Nightingale, "Three-fourths of the whole mischief in women's lives arises from their excepting themselves from the rules of training considered needful for men."

Next we come to "The Science of Ethics and Etiquette" in relation to the trained nurse. Of course, the primary ethical base rests on the broad golden rule, "Never act towards, nor speak about others as you would not have others act or speak in regard to yourself under the same circumstances." The constant practice of this grows into a habit, and the habitual thinking of others first, and self last, is the main characteristic of a good nurse.

It is well, occasionally, to impress upon all connected with hospital life and work, that hospitals exist solely for the benefit of the sick and suffering. A certain type of modern nurse tends to the belief that hospitals exist for her training, and that her time is divided between "On Duty" and "Off Duty," the off duty period being her real life. It cannot be too strongly impressed upon a probationer that the main function of a nurse is to serve—to serve others; that upon her patience, skill, and gentle tendance, rest the comfort and well-being of sick and suffering

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