

been already done by the day nurses? We know that, unless there are acute cases requiring constant attention, the early hours of the night are comparatively quiet. Mrs. McLaren further detailed a number of poultices and dressings, a patient in delirium tremens, etc., and pictured the night work as a constant rush of toil, only concluding at 9.20 a.m. All this might occur, but such a night is not typical. May I be pardoned the egotism of offering my personal testimony. During ten years of actual nursing, before I assumed the not less trying responsibilities of Matronship, I did a more than proportionate share of night duty. I know, no nurse better, how physically wearing it is, chiefly because the life is an unnatural one. But I also know that the average of work is not so heavy as Mrs. McLaren stated. No nurse would seek to belittle the work of a nurse. We are not doing that, nor seeking to retard evolution and reform, if we express a fear lest we lose our reputation for courage and endurance, and deprecate the modern sentimentality which often gives us cause to pray, "Save me from my friends!"

In a subsequent paper, Mrs. King Roberts gave a much needed warning against sentimentality, and touching this very question of night work, said (what is true) that night duty in a hospital ward is, on the average, less physically heavy than day duty, and that nurses not infrequently welcomed the change on that account, and quoted a nurse who had said to her, "I'm so glad to be on night duty, now the examination is coming on, for I've more time for reading." Mrs. King Roberts' paper was admirable—clear, rational, and free from "gush"—in my opinion, it alone redeemed the discussion. I believe this lady is not a trained nurse, but was Home Sister at Bart's for some time. She certainly spoke as one who understood her subject. If she is not the rose, she has lived near it. She described the growth of the professional (and commercial) element in nursing, and the resultant change of sentiment regarding the work. In the early days of trained nursing it was regarded as a "vocation," and generally undertaken in a religious spirit, whether or no the nurse belonged (as was often the case) to a religious organization. To women actuated by such motives no work seemed too hard, no hours too long. But with the development of nursing as a profession it was inevitable that the workers should make more demands. Nevertheless, she considered that nursing could not be regulated in the same way as a trade. She advocated State registration as a safeguard for nurses and the public, as a means of distinguishing between the false and the true, to an initial extent, at least. Registration could

never afford a guarantee that a woman was a good nurse, but would tend to eliminate the bogus untrained, or semi-trained nurse who is met with everywhere. As an instance, she quoted the case of one, who, after only six months training in a children's hospital, was sent from an institution to nurse all and sundry cases at the usual fees. There are few trained nurses who could not give similar evidence from their own experience.

Lady Mary Murray urged the eight hours system, and spoke of nurses standing for thirteen hours. She also brought a charge against the hospitals of want of care for nurses in sickness. Surely this reproach is undeserved by the great majority of hospitals? Certainly it is by all with which I am personally acquainted. The complaint regarding food badly cooked and served, inferior in quality, and lacking in variety, which was made by this speaker and others is less groundless. Much has been done in this direction, but yet the dietary in many hospitals is far from what it ought to be. Moreover, this is not a matter which can be reformed once for all, but a subject requiring constant attention.

Much lies in the power of the Matron, if she is allowed a free hand. But (with the desire to give even the devil his due) let me say, on behalf of Matrons and other hospital providers, that few outsiders can realise the difficulty of catering satisfactorily for a large and heterogeneous community, including the sick, who are naturally capricious; and nurses whose appetites are jaded by their work. Sometimes it seems to the unhappy or disheartened housekeeper that complaints are made with little cause, but having been a nurse herself she has learnt to make allowance for exaction.

The other speakers who followed on the nursing question seemed to me merely echoes. No new point was raised. Finally the resolution was carried with a rider, "That this Council urges that in order to ensure the satisfactory carrying out of these reforms it is essential that every Hospital Board and House Committee should include representatives of both sexes." "Miss Georgina Hill, whose efforts in this direction are well known, spoke to this resolution, and also Mrs. Walter Read. The latter made a telling local allusion. "For fifty years," she said, "the Birmingham Lying-in Charity has existed, but this year for the first time a woman is added to the Board of Management." Surely this is an anomaly which must strike every man and woman. It cannot be a question whether or not *this* is woman's work?"

The debate on hospital and nursing matters being concluded, the abiding impression left upon my mind was that such discussions are futile

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