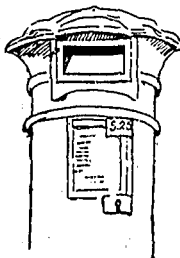


Letters to the Editor.

NOTES, QUERIES, &c.



Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in any way hold ourselves responsible for the opinions expressed by our correspondents

BOARD LADIES.

To the Editor of the "Nursing Record."

DEAR MADAM,—Now that "A Scotch Matron" has applied her pen to this subject we may hope that other Matrons—Scotch, English, and Irish—will give their ideas on the subject, and perhaps even their experiences. I mention the three component parts of Great Britain because the men thereof differ considerably in their appreciation of an able-minded, practical woman.

In Scotland, such a woman joining any Board of Management is usually received with respectful pleasure. In England she is considered a nuisance, and generally treated accordingly, until her nerve entirely fails. Of Irish Boards I have no experience. When men are able to admit that womanly matters are best understood by women, and therefore give them a place on Educational, Hospital, Poor Law, Nursing, and Asylum Boards, much friction, needless expenditure, discomfort, and scandal will disappear.

That Queen Victoria's reign has produced many remarkable women in both public and private life is indisputable—that they still maintain a hostile attitude towards the helpmates provided for them, surely requires some explanation from the men?

Yours faithfully,

ROSINA GRAHAM,
M.R.B.N.Assoc.

November 18th, 1901.

To the Editor of the "Nursing Record."

MADAM,—The question of "Women on Hospital Boards" is one in which I have taken some interest and also public action, and after reading the Papers and Discussion on the subject at the late Congress at Buffalo, I am more convinced than ever that women should be members of every Hospital Committee and Hospital Fund Committee in existence. Let those who oppose their right to sit on such Committees give one convincing reason for their narrow-minded action. I defy them to give one reason which would appeal to liberal-minded and just persons. That the Metropolitan Hospital Committees will ever admit women until they have a Parliamentary vote and can insist upon taking their rightful share of the management of all public institutions I don't believe. London is the most retrograde and intolerant city in the Kingdom where *decent* women are concerned, and the reason is not far to seek. It has a larger percentage of educated prostitutes than any city in the Kingdom, and it is in consequence one of the most criminal, dirty, worst lighted, and benighted. I hope you will record every case where the more progressive cities elect women on to Hospital Boards. Edinburgh and Glasgow are setting a good example. One gets so weary

of all this "orientalism" on the woman question—it all harks back to that.

Yours very truly,

"A RATE AND TAX PAYER."

NURSING IN EGYPT.

To the Editor of the "Nursing Record."

DEAR MADAM,—The reports presented to the International Council of Nurses, which are now appearing in the NURSING RECORD, are most instructive. I was very interested to note last week that the organization of nursing in Egypt, which we are accustomed to regard as a country which has progressed little since the time of the Pharaohs, is ahead of Great Britain, both in the scope of the educational course which it provides for nursing pupils, and in its system of registration by the State. In England we consider a nurse "trained" who has satisfactorily passed through a three years' course of instruction in medical and surgical nursing, and passed an examination in these subjects. Then we certify her, and send her out into the world armed with a certificate, under no control of any kind.

In Egypt they manage things better. The term of training is for three years in the wards of the Government Hospital, which is the authorised school, they receive instruction in medical, surgical, ophthalmic and gynæcological nursing, and are taught midwifery by the surgeons attending the cases in the obstetric ward. At the end of three years, if a nurse's conduct has been satisfactory and she passes her final examinations, she receives a diploma from the Sanitary Board, and is registered by the State as a Hakeema. A Hakeema may legally certify the cause of death, write a simple prescription, attend cases of normal labour, treat gynæcological patients, and in times of epidemics inspect patients. Which of us has as much power or indeed is qualified to exercise it? The main thing is, however, that these thoroughly trained Egyptian women are under the control and protection of the State, a privilege which we British nurses have asked for for long but have so far failed to obtain. May we prove ourselves worthy of it for on that after all depends our attainment of it in the future.

I am, dear Madam,

Yours faithfully,

BRITISH NURSE.

MIRRORS IN HOSPITALS.

To the Editor of the "Nursing Record."

DEAR EDITOR,—I am pleased to see you advocating hand mirrors in hospitals—but why only in the women's wards? Surely the men make use of such vanities—and they are quite as deeply interested in their progress during illness in the wards as the women—and would also enjoy an occasional peep in a glass which would "throw pink tints" on a "colourless skin." My experience is, however, that many patients bring in a bit of looking-glass "just to part me 'air with, Sister." Once I knew a poor fellow to sever the "carotid" with such a piece of glass in the bath-room, since when directions were issued here that patients should not keep any glass or knives in their lockers. Properly mounted hand mirrors might, however, be kept for general ward use. We nurses always need one when warded.

Yours truly,

STAFF NURSE.

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