

The Place of Sensitiveness in Nursing.

One of the axioms laid down by the Morris school was that the commonest things in daily life may be made beautiful. This axiom, in both letter and spirit, might well be adopted by nurses. From time to time someone arises to cry out against the degradation, or the shock to sensitive natures, involved in performing the chief duties of nursing, and this notwithstanding the increased sense of the proper proportions of things we nowadays meet with in women generally. It is not uncommon to hear some women express admiration for nurses and nursing, but explain that they themselves are far too sensitive to undertake such work.

All practical experience of nursing goes to prove that a nurse cannot possibly be too sensitive, though she may be too squeamish. Sensitiveness in the nurse should be to her the patient's mental barometer, and without it she must always be handicapped. Undoubtedly the secret of being exceedingly sensitive, and yet not suffering from this, lies in one's capacity for idealising every detail of sick-room life. Once, holding forth on this conviction to a lay friend, she demanded, "But can you idealise the subject of bed-pans?" "Why, certainly," I replied, and proceeded to fully elucidate my theories on the importance of this often underrated point in nursing, a point with which the mental and physical comfort of the patient is so closely associated. The woman who does idealise, and who honestly feels no repugnance to any part of her duty, must always be infinitely more acceptable to her patients than she who may imagine her claim to refinement to depend on an attitude of abhorrence to certain duties. Fortunately for sick folk, the latter type is rare amongst fully-trained nurses.

It has always seemed to me that the maternal quality is so essential in a nurse, that quality which will enable her to feel that the helpless sick are in a measure but children, and that as a mother would not hesitate to attend to all the needs of her child, so a good nurse should have a similar feeling of tenderness for the helplessness of her patients, and this intensified by the realisation that the ailing body holds an adult mind with its own special suffering of being laid low. It sometimes happens that a patient is obviously distressed at what he considers to be an infliction of unpleasant tasks on his nurse. In such cases, a woman of fine perceptions and equally fine tact can easily reassure him on the matter, and so help to secure to him that important factor in recovery—peace of mind; whereas the less sensitive type of woman would find this impossible. I have known both men and women patients derive much comfort from the

truthful assurance of their nurse—in response to an expression or sign of embarrassment—that she regarded all very ill patients similarly to helpless little children, and the fact of age, whether six years or forty, in no way affected her attitude towards the necessities of illness.

How common it is to find a distinction drawn by both nurses and the public between medical and surgical as against maternity cases, many nurses regarding the latter as *infra dig.* If refinement and sensitiveness be needed anywhere, surely it is in the nursing of maternity cases. Yet I have heard some very curious expressions of opinion, affirming the greater suitability of callous, uneducated women for such work. Once I found myself in charge of a maternity case in a little country town, where nothing but the Gamp variety had ever appeared in such a capacity before. I afterwards learnt that I had caused much comment. The doctor's wife, with kindly intent, called to see me, explaining she had heard of me from my patient's husband, and expressed her opinion that it must be very pleasant for the patient to have an educated nurse, but, lowering her voice mysteriously, she said, "It cannot be nice work for you. Don't you find the sponging very unpleasant?" I earnestly assured her indeed I did not. To my mind it was, if I were to consider the relative values of such matters, considerably less objectionable to sponge a healthy maternity patient than to dress an abscess on a man full of disease. Such comparisons were novel to the lady, and greatly altered her view of the subject. Many patients have told me that it made the greatest difference to their comfort to be nursed by one who, though sharing all their own sensitiveness on the necessities of illness, could face those necessities pleasantly without any *arrière pensée*. Unless a nurse bring to bear on her work an enormous capacity for idealising the common things of life, and so making them beautiful, her patients, especially those having the telepathic sense developed, must suffer many things, mostly intangible, and she herself is bound to become hardened and less refined as time goes on. And it is well to realise that true modesty is not prudery, though apparently many still consider the terms synonymous.

The spirit which enables a refined and sensitive woman to perform with perfect equanimity the least attractive offices in the service of the sick, irrespective of colour, creed, or sex, may not be understood by many outside the ranks of nurses. But as the profession evolves, the understanding and appreciation of this spirit will assuredly grow amongst the public, until the day will come when it will be an unheard-of thing to suggest that any part of the personal care of the sick could be more suitably performed by callous and uneducated persons.

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