

student would then be eligible to offer herself for clinical training in the wards of the various hospitals.

The next, and the most important, step in the education of a nurse would be practical instruction in hospital wards in the actual care of the sick. The term of practical clinical work should extend over a period of three years, during which time the pupil should have the advantage of careful training under skilled teachers, who, in addition to being registered nurses, are qualified for the special work of imparting knowledge to others.

The course should consist of instruction in medical, surgical, and obstetric nursing in all their branches, and must include the management of the ward, and of the operating theatre and its annexes.

Finally, in order to qualify women to fill administrative posts in the nursing world, post-graduate courses are undoubtedly required in which special instruction both in the art of teaching and in the details of hospital superintendence would be given by qualified instructors. It is also essential that trained nurses engaged in private and in district nursing, and in other branches of the work, should be enabled to obtain post-graduate instruction, and so keep in touch with modern improvements and methods.

In short, therefore, preliminary, clinical, and post-graduate training is required in order to organise modern nursing education in the best and most complete manner.

The costliness of such a curriculum cannot be overlooked, and the financial aspect, therefore, demands attention. But education, to be efficient, must always be costly, a fact which has been recognised in every civilised country by making it a matter of State concern and subvention, and by the endowment of colleges and universities by public benevolence. It is a fair argument, therefore, that the recipients of a nursing education should always be prepared to pay a substantial proportion of the cost, seeing that it qualifies them for the exercise of a remunerative profession. Yet this branch of education, being of national importance and usefulness, might legitimately expect assistance from the State and from the public. In support of this contention, it is claimed that both medical and nursing education should be made as perfect as possible, both for the sake of the public at large and of special sections of the community under the care of State departments. It may also be urged that preventive medicine and nursing are of the greatest economic value to the nation, and that, as a matter of business, State aid and private benevolence, by securing greater efficiency in the prevention of disease, and in the care of the children, would be amply repaid by the consequent conservation of the national health and wealth.

So far, much of the cost of the education of

nurses has fallen upon the charitable public who subscribe to our hospitals, and there is increasing evidence to show that this source of income is more likely to diminish than to increase in the future; while, on the other hand, there is a more general feeling that parents must be prepared to discharge their financial responsibility for the education of their daughters as well as of their sons. In the days when nurses were merely domestic drudges, when they learned but little and were taught less, when they were housed in discomfort, fared hardly, and attended on themselves, it was only reasonable that they should receive a salary in return for the work which they performed. Now they are, for the most part, comfortably, even luxuriously housed, in well-appointed Nursing Homes; a reasonable amount of domestic service is provided for them; they receive an increasing amount of expert instruction in their work to qualify them for the practice of their profession; they are relieved of much of the heavy ward work which formerly devolved upon them, and they are provided with uniform and washing. Is it not reasonable, therefore, that while their services are unskilled they should themselves pay part of the heavy cost of their education and their maintenance? while State aid and private benevolence might provide the remaining necessary endowment of the nursing colleges—for such Nursing Homes undoubtedly should be. We must also look to the same sources for the endowment of preliminary and post graduate courses.

It must not be overlooked that the educational aspect of the nursing question is keenly appreciated both in our Colonies and in the United States of America. In the latter, indeed, preliminary and post-graduate courses are already in operation in connection with many educational institutions. And in three of our Colonies, and in five of the American States, Registration has been enacted by law. In New Zealand, a minimum curriculum has been defined and uniform nursing examinations are conducted, the subsequent registration of successful candidates being undertaken by the State. In Australasia, nurses are well organised, and it is proposed at an early date to invite Parliament to consider similar legislation. In Cape Colony and Natal, Acts of Parliament have been passed providing for the education and registration of trained nurses. In Great Britain, the Society for the State Registration of Trained Nurses, founded solely for the purpose of obtaining an Act of Parliament with this end, has done good work in this direction. During the two years of its existence, it has secured the adhesion of over 1,200 nurses as members, and a Bill has been introduced into the House of Commons.

THE INDUSTRIAL ASPECT.

Time will not permit of any exhaustive consideration of the industrial aspect of this question,

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