



**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.*

**OUR GUINEA PRIZE.**

*To the Editor of the "British Journal of Nursing."*

DEAR MADAM,—Many thanks for cheque received of one guinea for prize puzzle.

It was a great surprise and pleasure to have won the prize.

Yours faithfully,  
ALICE M. WARREN.

St. Andrew's House,  
Mortimer Street, W.

**A SOP FOR CERBERUS.**

*To the Editor of the "British Journal of Nursing."*

DEAR MADAM,—Miss Monk, of King's, to judge from her article in the *Monthly Review*, has, apparently, not kept herself informed of the wonderful progress made in nursing organisation in America and Australasia, as she makes no mention of the splendid work accomplished by the co-operation of Matrons and nurses for the general good in those continents. This seems to me one of the fatal altitudes of mind on the part of the Matrons of many big hospitals. They affect an attitude of superiority, laugh at the very idea of studying the nursing question, as presented in the expert literature of the day, and are in reality exceedingly ignorant on many points which the intelligent members of the public take the trouble to study. These ladies have formed themselves for years into a solid phalanx in opposition to all movements initiated by certificated nurses for the betterment of their calling, unless philanthropy and patronage are to the fore. I now hear that owing to the widespread demand upon the part of nurses and the public for reform, the reactionary party are evolving a "scheme" for our management, without consulting any of the organised societies of trained nurses or the Matrons who for years, in and out of season, have been our active friends and well-wishers—the women who realise that they are nurses first, and that what is for the good of the majority, is best. Now, personally, I look with some apprehension upon any "scheme" which the autocratic minority may evoke. They deny our right to organise on representative lines; they discuss our affairs behind closed doors; they have said quite plainly that our work is "absolutely nothing"—nothing to standarise, nothing to examine, nothing to register! They have fought for years against our demand for legal status and the protection it would give us, and now in the twinkling of an eye we are informed that they are making their august decision on matters which affect us vitally, and, presumably, all we have to do is to shut our eyes, open our mouths, and swallow the "scheme" they have prepared for us.

Dear Mrs. Editor, this will not do, and we rely upon you to keep us informed of any pitfalls prepared for our undoing. We English nurses claim what our colleagues all over the world are hoping to enjoy—

1. A standard of training and education—fair, sound, and simple.
2. An unbiased examination without fear or favour.
3. An outside, unprejudiced Governing Body, with a share of self-government.
4. Legal status.

And do not let us be satisfied with anything less.

Yours truly,  
A HOSPITAL SISTER.

**RIVAL OR COMRADE?**

*To the Editor of the "British Journal of Nursing."*

DEAR MADAM,—The writer of the article in a recent issue of the *British Medical Journal*, who speaks of the American nurse as having "set herself up as a professional rival to the physician" must surely have drawn on an imagination which outrivals that with which we as a nation are sometimes credited. The American nurse looks on the physician as her best friend, and her relation to him is of the most cordial description. Good fellowship, not rivalry, is its key note. Why, in all our efforts for improvement and organisation, we American nurses have received invaluable support, sympathy, and help from medical men! Of course, even in the United States, one here and there meets with one who is illiberal, but he is the exception rather than the rule. The idea of professional rivalry is, of course, absurd. The lines on which each profession works are too well defined for any such thing. Our doctors, I am glad to say, know the value of the trained nurse, know that their own reputation is to a great extent in her hands; for an inefficient woman may ruin their most skilful surgery, their most careful medical treatment. So it comes to pass that they are not only willing but anxious that our education should be thorough, and when they are satisfied that we are efficient they treat us with the consideration which they consider the due of so responsible a worker, and with the courtesy which American men, as a rule, accord to women. That is, I think, where the difference comes in a great deal. The medical man in your country expects—shall I say it—almost servile deference from nurses, because the attitude of the British man—at any rate, of the middle-class man—is a lordly one towards women. We do not understand this, but, as far as I can see, it accounts for the line taken so often in your Press towards nursing questions. It seems impossible for it to conceive that a nurse is a person who counts for anything. It resents this reasonable desire on her part. Patronage she may have in plenty, the position of a self-respecting and respected worker never. That is the crux of the matter, viewed from the standpoint of an outsider.

I am, dear Madam,  
Yours faithfully,  
AN AMERICAN NURSE IN LONDON.

**HOSPITAL MANAGEMENT.**

*To the Editor of the "British Journal of Nursing."*

DEAR MADAM,—Whilst large sums of money are being given, subscribed, and bequeathed for the service of the sick poor, and the cry for "more" still resounds through the land, it cannot be un-

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