

first took half an-hour for registration of temperature, now half a minute is one of the commonest! It is a matter for congratulation that many of this century's inventions go to make sick nursing less arduous, and more truly a profession in the highest sense of the word.

The Revolution in French Hospitals.

By MISS LAVINIA L. DOCK.

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HOSPITALS OF PARIS.

In 1877 the famous "laicisation" of the Paris hospitals took place, and in 1878 the first nursing school was established. Let it not be supposed, however, that anything like the pioneer schools of England or America was created, or that any similar movement among educated women renovated these old hospitals.

"Laicisation" meant that the religious sisters were removed from the hospitals, and that the entire control of the nursing arrangements was assumed by the directors and official and medical staffs. The entire nursing *personnel* consisted of an enormous and unwieldy mass of illiterate, common, unrefined—indeed, often coarse and hardened—servant nurses of both sexes. The change naturally met with bitter opposition from the clergy and all the friends of the sisters. Yet the clergy themselves were primarily to blame, for, by their artificial and arbitrary ruling and limiting of the usefulness of the sisters they had made them simply figure-heads, not directly responsible to the medical staff, not invariably obedient to the medical chiefs, not realising the demands of asepsis and science—in short, retrograde workers, no longer adapted to their environment.

The correspondent of the *British Medical Journal* already quoted wrote:—

"Had the French Sisters of Charity moved with the times to establish training-schools; had they taken their part in the Nightingale movement in England or the Deaconess system of Germany, they might now be in a better position before the world."

While these words are perfectly correct, the writer should have put the blame for this deterioration where it really belonged—namely, on the shoulders of the men whose preposterous interference and repression had effectually ruined the sisters' usefulness.

So these women, who could have been and who might have been the most perfect nurses imaginable, many of them belonging precisely to the refined class needed in hospital, were turned out because one set of men had so subordinated them that they were useless as handmaidens of modern medical science, and another set of men undertook to show

what they could do in the training and ruling of nurses. The situation had its pathos, and was not without its ludicrous features.

The "nursing school" first established was by no means after the English models. The first necessity, before beginning a course of professional lectures, was to impart primary instruction, for the majority of the nurses were unable to read and write. The process was a slow one, too, because they could not be compelled to attend the courses of instruction. They were not taken in under contract to fulfil a course of practical and theoretical work; they were engaged on a wages basis, and could only be encouraged to avail themselves voluntarily of the educational advantages offered.

The problem was an enormous one. The municipality of Paris has under the care of its Public Charities Department fourteen large general hospitals, eighteen special hospitals, and twenty-seven institutions for chronics, incurables, almshouse cases, and every imaginable variety of dependent. What the total number of patients was when the change was first inaugurated I do not know, but in 1888 Paris was caring for 200,000 patients, 24,000 infirm, 200,000 paupers, and 40,000 rescued children.

All this with the lay nursing staff, who were getting lessons in reading and writing. The first "school" was started in the hospital La Salpêtrière, the next in Bicêtre, then in Laënnec, Pitié, and so on. The two former are for chronic and incurable cases. Here it was, of course, easier to begin. The plan of the physicians was to divide the teaching under three heads: (1) the course of general education; (2) the professional theory; (3) practical work by rotation in the wards. They made this plan, struggled with it, and struggled with the nursing staff, alone.

Let us not appear to criticise these men unfairly. It is not easy to say where, or how, they could have found trained, competent, educated women to help them. It was just after the time of a dreadful war; Germany was a deadly enemy, otherwise head nurses or Matrons might have been found there. With England, also, national feelings were so little friendly that Dr. Anna Hamilton says it was not until 1897 that a fairly detailed account of Miss Nightingale's work was given in a French medical journal, and that it would have been quite useless to suggest asking English nurses to undertake reform work (though they would doubtless have been glad to do it). As late as 1896 an English sister was called to a hospital in Marseilles, and to-day this unfortunate prejudice between two nations has happily disappeared.

Dr. Hamilton herself is not an old enough woman to have been ready to help in the beginning. Her own splendid hospital work was begun in the early '90's. One does not wish to be unjust to the French women either, yet it seems hard to avoid the con-

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