

Discipline has been greatly improved by the introduction of hospital nurses. The discipline of asylums on the whole is slacker than that of hospitals, whereas that of our great hospitals is nearly perfect, in fact it verges on the side of severity.

In concluding this account of these developments of modern asylum administration I desire to acknowledge the great debt I owe to the many hospital nurses who have worked so loyally under me. As you are aware, the Medical Superintendent is the supreme authority within the asylum on nursing as on all other problems of administration. I have not only received much loyal service from nurses, but I have learnt a great deal from them, and some of their suggestions have initiated great reforms, for which I have usually received the credit. It is a human failing to grow conservative as we grow older, especially if we occupy for many years the same post, and I have found the intelligent inquiries and suggestions of fresh minds, especially of trained minds like those of hospital nurses, a useful corrective against mental rust and automatism. I have also found that the constant succession of nurses through the Asylum, as they were promoted to other asylums, if not too rapid, was an advantage, as each nurse interested herself in a different detail from her predecessor, and in course of time every detail of administration receives attention and becomes perfected. John Wesley and General Booth, two most successful organisers, had great faith in the advantages of a succession of workers.

The great interest I have taken in the introduction of hospital nurses to asylums has not been because it has benefited these nurses, but because I was specially interested in improving the care and treatment of the insane. It cannot be denied that asylums have had a bad past, and have been modelled too much on the prison, from which, indeed, they were evolved. I believe that the more we model our asylums on the best class of general hospital and the more we hospitalise our methods, the better will it be for the care and treatment of the insane. It is for this reason that I have taken an interest in introducing hospital nurses to asylums, and if in pursuing this primary object I have brought hospital nurses and mental nurses together and encouraged mutual regard and good feeling, this result is highly gratifying. There is little doubt that in the future no nurse will be considered fully qualified who has not the benefit of a double training.

The Chairman said he was sure all present had listened with great interest to Dr. Robert-

son's extremely able and interesting paper. He was a pioneer in the employment of hospital nurses in asylums. He then called upon Miss Satchwell to present her paper.

#### MENTAL NURSING.

MISS SATCHWELL.

It is with great diffidence that I rise on behalf of mental nurses, and to say a few words upon the subject of mental nursing. For my only claim to do so is based upon the fact that I have the honour to hold the Certificate of the Medico-Psychological Society, and to have been sometime Matron of an asylum, and I feel that a Matron presently employed in the work could have spoken with much more effect. However that lady is not forthcoming, so there is no help for it, and I can only try to supply her place.

The great strides which have been made in the scientific treatment of mental diseases have necessitated an equal advance in skill and education on the part of asylum attendants. Half a century ago institutions for the insane possibly might have been with justice described as sepulchres, and not even whited sepulchres. When people were considered dangerous to themselves or to the lieges, they were shut up and recovery was not contemplated, they entered upon a living death. All social and domestic ties being severed, it was considered to be sufficient to provide them with just the bare necessities of life—a roof to cover them where they lay, chained upon the floors of their locked cells. The coarsest food was provided, and those who looked after these poor humans, living much under the conditions of animals, were, as they were called, just *keepers*, chosen mostly for their physical qualifications—muscle being the *sine qua non*. There was no nursing, of course, for solitary confinement, restraint clothing and appliances, and force, were the methods employed. On Saturday night food and water to last over Sunday were pushed into the cells, and the doors then locked, so that the keepers could get away. The idea seems to have been to run the institutions as cheaply as possible and avoid burdening rate-payers unnecessarily, for the maintenance of those useless members of the community, who were considered to be beyond the power of help or cure. These were the Gamp days. All know the difference in general nursing then and now. Equally important changes have been brought about in the treatment of the insane by learned and good men, who have written and worked in the cause. Insanity is now regarded as a disease curable in nearly half the cases, and therefore to be treated like any other disease.

[previous page](#)

[next page](#)