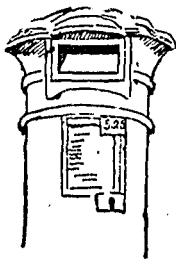


Letters to the Editor.

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.

AUSTRALIANS IN SOUTH AFRICA.

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

DEAR MADAM,—I am afraid I have disturbed certain doves in Australia, and the occupants have, without due thought, attributed a good deal of suppositious statement to me. I have by me an Australian nursing journal whose columns are largely filled with the subject, and the Editor, rather wide of the mark, seems to think I want to pull down flags, and to declare open war between the Mother Country and Australasia. I am sorry such a misunderstanding should have arisen, and that so much good indignation has been spent in vain.

If these ladies read my paper with a little care they will see I did not draw comparison between English nurses and those in Australia. I have never been near Australia, and I know nothing of its people nor its institutions. But with regard to nursing in South Africa I tried to describe the position, as it appeared to me, of my fellow nurses seeking a career out there. I should have given an unfair promise of success if I had not warned them that "Australians cut the ground from under English feet" not because they are better nurses, but being themselves Colonial they fall more easily than we do into Africander ways of life.

In dealing with peoples so vast and various as Colonials, one has to speak in general terms, and to judge by majorities. In South Africa people do not take life nor duty so seriously as we do. I can only speak of Australians as I found them out there, and since I am challenged am bound to repeat that the nurses I met with in military and civil life were not trained up to our standard. I do not attempt to say that these were typical Australian nurses nor representative in any way. I simply state they are the workers English nurses will have to compete with in South Africa. And I am inclined to think they are more popular than our nurses trained, perhaps, under the monastic rule of a London hospital. Colonials accuse Englishwomen of being too conscientious. They say we are saddened by thinking of our conscience in place of our comfort. No doubt the climate has much to do with it, but certainly the women born in South Africa take things as they come and are on the whole, better tempered than English women. I must acknowledge that even though thereby I incur the wrath of *The Times* newspaper, it is a pity Colonials feel it a reflection on them to be un-English. They can hardly expect to have all our old time-encrusted virtues and their own independent progressiveness as well. Australians

in South Africa pride themselves on a dashing disregard of our old English conventions, and tell you so in no unmeasured terms.

It may be this spirit fits them for Colonial life, or it may be the outcome of the conditions under which new countries are built up. I will not pretend to judge. I am trying to tell my fellow nurses something of the conditions under which they will work in South Africa.

These conditions are often different to those existing at home. Nurses may be engaged in the homes of the small tradesmen and artisan class, often because there is no white servant nor friend to help, and a woman patient cannot be left with a Kaffir boy. And although one can love this class of people in a hospital-ward or in an English cottage, it is not quite the same in a country where "Jack is as good as his master"—and a little better. They are apt to think that because a nurse will cook and clean in a humble home that she has lost her caste, and may think she can do "Kaffir work." Now and then these good patients will save up a week's washing or so for the maternity nurse to get through between whites, although no white woman does washing, unless her own, in South Africa. And it sometimes happens that the hospital nurse will have to look after a few, or even a houseful of lodgers within the patient's home.

In the homes of well-bred people, no matter how poor, the nurse is treated with great consideration and is not expected to do more than nursing, and to give as much supervision and care to the household as she can spare from her patient. If the nurse is an understanding woman, she will be able to identify her sympathies with the family and do much that is outside her professional duty.

But she must be prepared for the unforeseen. I would not like to bring the medical profession down on my devoted head, but it is generally understood amongst English nurses in South Africa, that Colonial medical men are careless in points of etiquette we lay much stress upon.

For example, disregarding bell and knocker, they will enter the house unannounced, and march direct, with a perfunctory tap, into the patient's bedroom, without the nurse or any one of the family attending. Scotchmen sometimes fall into the habit, Englishmen seldom, and it is said, Irishmen, never.

I was nursing a friend of mine, a lady who was punctilious, and I myself objected to the medical attendant bursting in on her in that manner, so I locked the front door once while I got something from the kitchen. But the doctor who chose that moment to call was equal to the occasion. He did not knock, nor waste time on the door-step, he just climbed in by the window! *He* was an Australian.

Now I do not, for a moment, suppose that medical men in Australia pay professional visits by leaping in through opened windows. But this incident occurred in South Africa, in the most "English" city of Natal, and no one was surprised. My own feeling was rather stronger than surprise, so that, perhaps, I must plead guilty to the insular superiority one of your correspondents charges me with. But they are all wrong who would attribute to me any

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