

the documents issued by the Fund itself to prove how impossible it was that such a scheme could benefit the poorer class of Nurses. We marvelled then, and we have never ceased to wonder, how shrewd business men could have been led to believe in the knowledge of the needs and the wishes of Trained Nurses assumed by any unprofessional person, and despite the fact that the chief professional journals concurred in pointing out the entire unsuitability of the scheme. However, for some occult reason such was the case. All opposition, and even the most straightforward criticism was hotly resented, and all the enormous influence and honoured names of Lord Rothschild, and Messrs. Morgan, Gibbs, and Hambro were invoked to advance the scheme.

We pointed out that many Nurses now-a-days were gentlewomen who either themselves possessed money, or could easily obtain it from their friends. It was surely not for such as these, we argued, that this Fund has been instituted; but when we heard of the great pressure brought by certain Matrons upon their Probationers to join this Fund, we predicted that some would, for the sake of peace and quietness doubtless do so. We ask the Council if it has the slightest idea of how many of its present policy-holders belong to this class. From our information, from different parts of the Kingdom, we are inclined to believe that a good many of such women must have commenced to pay for annuities, which they certainly will never need by reason of poverty.

Then we pointed out that the women for whom avowedly this fund was instituted—the hard worker, without provision or hope for the future—of necessity belonged to a class which every day is diminishing in numbers in the Nursing world, as gentlewomen of education more and more adopt the calling. And, furthermore, that these women, having no other resources in the world except their scanty remuneration, could not clothe themselves, help needy relations—as almost invariably such perforce have to do—and at the same time pay the heavy premiums required by the Fund for an annuity of any amount, much less for one really sufficient for them to exist upon when past work. This has been verified, as the Council must know, again and again, if it has been informed of the pitiable little annuities for which such women have made application. So once more, as we have done before, we inform the Council that only gentlewomen with resources which place them far beyond all chance of want can pay the premiums regularly, and all that the truly needy Nurse can do is, with pain and pinching, to scrape together sufficient to provide her finally with an annuity utterly useless to her, “except,” as it has been cynically said by some one,

“she desires to continue a subscription to Mudie’s Library.”

There is, throughout the kingdom, a growing knowledge of these facts, and increasing sorrow that funds so beneficently intended, and which could have been easily made so invaluable to Nurses if properly utilised, should have been employed in the foundation of a new Insurance Office. In plain language, and whether the Council realises it or not, that is what has been done. All that is now proposed to be done for Nurses could have been as well, if not better—most assuredly more cheaply—done by fifty old-established offices. The scheme is floated; the pressure heretofore brought to bear on Nurses to join will be relaxed, and the Council will probably find that the number of applicants will steadily diminish, and that many of those who have obtained policies will suffer these to lapse. What will the Council do, supposing the number of its policy-holders tends rapidly down towards the vanishing point? The Articles of Association of the Fund are somewhat wide. Has the Council realised how wide they are, and to what developments its first benevolent scheme may extend under the powers it now possesses?

OBSTETRIC NURSING.

— BY OBSTETRICA, M.B.N.A. —

PART I.—MATERNAL.

CHAPTER IV.—CONVALESCENCE.

RECOVERY from child-birth, commonly called the puerperal state, resembles no other condition, for though peculiar to women, it exists only under a certain phase of their uterine life—parturition. In my introductory paper (No. 78 of our journal), I touched upon this matter, and I earnestly commend it to the attention of Obstetric Nurses as bearing upon the important duties we are about to enter upon.

The two leading phenomena of the parturient diathesis are the involution of the uterus, and the establishment of lactation. The first demands from an Obstetric Nurse an initial duty that at first sight might appear wholly unnecessary, and in fact was never thought of until recent times—antiseptic precautions; and these again are peculiar, for they are directed not to protect *others* from infection, as is the case in infectious diseases, but to protect the patient from *other* or malign influences from without that apparently have no existence, for every member of the family and household may be in perfect health, and there is nothing infectious or dangerous to others

[previous page](#)

[next page](#)