see if something can be done for the benefit of asylum nurses."

Now turn to India and read what a nurse has to say in the *Statesman* as to treatment in the Medical College Hospital, Calcutta, the seat of British Government in India:—

SIR,—I notice that many letters are being inserted in your paper about the woes of the General Hospital nurses, but the unfortunate ones at the Medical College Hospital have had no champion as yet, and I should be much obliged if you would kindly insert this—for our grievances are many and real.

1. Food for Nurses taking Night Duty.-We never get a meal in our rooms, even tea is not allowed after coming off tired from our all night duty at 6.30 a.m.; if we are unable to eat the meal provided, consisting of tea and an egg or perhaps cold meat (which, after the sights we see, we sometimes feel too sick to eat), we have to wait till 2 p.m., when, if we get up and go downstairs, we may have some tea and a meat dish. The nurse who has been on night duty is not allowed breakfast at 11 o'clock with the other nurses, and woe betide her should she come down, for the only thing she gets is a scolding, the reason given being that she should be asleep; but how can she if she is hungry? So, practically, we get nothing till 2 p.m., which means (unless we provide it ourselves) no food but bread and butter for 22 hours. We have four wards, of 16 patients in each ward (without counting extra beds), making 64 patients for each night nurse to look after single-handed; while at the General Hospital there are three nurses-senior, junior, and probationer for a ward of only 24 patients at night.

2. Food for Day Nurses.—Our Chota Hazri is at six o'clock (bread, butter, and tea); breakfast at 11 o'clock; 2 p.m., tea with bread and butter; 4 p.m., dinner. Our meals are never varied, and we could tell you our food for a whole week, and on Fridays we have (the most of us are Protestants) to live on tinned fish (not fresh) with no meat. Neither the Matron nor the Sister in charge is ever present at our meals, and the house-keeper stays but a few minutes. From 4 p.m. we go to 11 o'clock the following morning (18 hours) with but a piece of bread and butter at 8 o'clock p.m., and the same at 6 a.m., and the younger nurses and probationers are often so sick from want of food that at 11 o'clock they cannot eat—and we get 11½ hours' work every day with an afternoon off every five days—and also night duty.

noon off every five days—and also night duty.

Fines.—If we, or any of our patients, break the thermometers, we are fined a rupee, which is especially hard on the nurses in the accident wards, where two and three thermometers are broken in a month. If we are late on duty we are fined, the first five minutes 4 annas and 2 annas every other. If we are a little late for meals (which one sometimes cannot help, as, if a case comes in a short time before we go off duty we cannot leave it to the relieving nurse, but must take the temperature, sponge the patient, etc., etc., which takes at least half an hour), we find our food cleared away and

no grace given us. There are a number of other small restrictions which are galling in the extreme, and which make our lives so miserable that we are on the brink of insubordination, for we are treated more like prisoners than rational beings. These, however, I will not trouble you with, as perhaps the Committee may see fit to inquire into them.

An M. C. Nurse.

Realise that nurses in the United Kingdom have for twenty-two years been pleading for just treatment and legal status, and that this scandalous overwork is still permitted in public institutions in England and India, and then decide whether or no irresponsible hospital managers shall continue to have a free hand where nursing labour is concerned. The economic condition of a nurse in many institutions is that of a serf, and Parliament must soon attend to our claim for justice. At present we have no guarantee of efficient education, no protection from the philanthropic sweater in high places, and who cares? The King may—we must find out.

We are glad to hear from Miss J. C. van Lanschot-Hubrecht, of Amsterdam, that the Head Nurse of the Cholera Isolation Sheds, who was reported to have died of overwork, did not do so, "but from an acute illness, which the professional oath forbids the physician to name."

An Important Conference of the A.T.A.A.

The Australasian Nurses' Journal for August contains a most interesting report of the first Conference of Delegates from the branches of the Association, held in Sydney. Most important questions were discussed, the formation of a Federal Council, State Registration of Nurses (concerning the advantages of which the whole medical and nursing professions appear unanimous at the antipodes), Insurance for Nurses, the Abolition of the Special Register, Training in Private Hospitals, Graduation from Small to Large Hospitals, Training in Children's Hospitals, a Registered Outdoor Uniform, and an Eight Hour Day for Hospital Nurses; from which the far-reaching importance of the Conference can be realised.

Dr. C. Bickerton Blackburn has, owing to pressure of professional work, resigned the position of Hon. Secretary to the Association, after five years' devoted service, to the very sincere regret of every member. Dr. St. John Dansey has been elected to succeed him.

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