

in particular. It is easier to be disloyal to the doctor in private nursing than it is in hospital. The patient and the patient's friends are so apt to ask you what you think of the doctor's treatment; do you approve of such treatment, is it what you have usually seen, etc. Now, I think very few nurses are intentionally disloyal, but they are sometimes taken unawares by the subtlety with which these questions are sometimes put. The wrong done by a nurse who falls into this error may be irreparable. Disloyalty to the doctor is a wrong done to him and to the patient by shaking his confidence, besides being a dishonour to one's profession. Doctors not only have a right to, but *deserve*, the loyalty of the nurse, because they themselves with few exceptions co-operate loyally with her, and show a generous spirit of freemasonry towards her. A certain amount of professionalism in a hospital is necessary, in order to maintain discipline, but that does not belong to the gentler art of private nursing, where it would be aggressive. *There* professionalism should be *felt* rather than seen; the nurse should be persuasive, not assertive. She goes to the house as a necessary invader, not as an invited guest. To some people, the thought of having a trained nurse in the house is by no means a welcome one; they fear she may "upset the house" and give trouble to the servants. If a nurse does this, it is quite inexcusable; she goes to save trouble, not to give it; she goes as the servant of the sick.

Before I proceed to the next subdivision of this subject, I should like to say a word upon the very important matter of the nurse's sleep. I do not consider that sufficient attention is given to this matter; it does not only concern the nurse, but very largely the patient, and therefore comes within the scope of this paper. There are still quite a number of people who appear to think that training to be a nurse creates in her a kind of metamorphosis, which enables her to do without sleep, or, at least, with much less than other people. The public must be made to understand that if the nurse is to do her duty conscientiously to her patient, she must also do her duty to herself in the matter of sleep. I contend that a worn-out nurse cannot do her duty to her patient. It is often the nurse's fault; she is too ready to attempt to forego sleep, and that has led people to suppose that she is a superhuman creature. I am speaking of when there is only one nurse. If the patient is so ill that he requires attention night and day, there should be a second nurse without any question. If the patient is sufficiently well to be able to do with only one nurse, he—or she—is also sufficiently well to allow her proper time for sleep. I believe the

general public are in total ignorance of the serious results accruing from this existing evil. In desperation nurses resort to drugs—they must get sleep somehow; some acquire the morphia habit, and even suicide is not unknown.

This difficulty belongs almost entirely to the private nurse; in hospitals proper provision is made for sufficient sleep for day and night nurses.

Some doctors give attention to this matter on behalf of the nurse, others are quite indifferent. I have no hesitation in saying that the difficulty of obtaining sufficient sleep—not always, but in very many cases—is the greatest trial of the private nurse.

(To be concluded.)

International News.

FROM JAPAN.

Miss L. L. Dock has received a characteristically charming letter from the Marquis Matsukata, the President of the Red Cross Society of Japan, in reply to the invitation of the Council to Miss Take Hagiwara to act as Hon. Vice-President for Japan, until such time as Japanese Nurses have a national organisation.

The Marquis Matsukata writes: "We can just imagine how successfully your conference was carried out, thereby, we have no doubt, resulting in affiliating more nurses of the world for the humane work. . . With reference to your inquiry about the nomination of an Honorary Vice-President for Japan, allow me to state that not only have we no objection, but also Miss Take Hagiwara will be delighted to accept your invitation."

FROM SWITZERLAND.

The newly organised Swiss Nurses' Association has the following objects:—

1. To unite in one Association all male and female nurses.
2. To raise the professional standards of nursing.
3. To promote the interests of nurses by the following means:—
 - (a) The arrangement of nursing homes on a co-operative basis, with a view to improving the economic position of nurses.
 - (b) To institute a uniform curriculum of instruction.
 - (c) To institute a central examination.
 - (d) To exclude morally inferior persons from the profession.

We congratulate the Swiss nurses on their comprehensive programme. We could do with it all in England.

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