

that nurses, besides having their hygienic conditions improved, should also be treated with more kindness than formerly. Health may be broken down quite as effectually by harshness as by bad air; the sensitive spirit can be starved by lack of sympathy as the body may pine on insufficient food. "Man doth not live by bread alone," and true health of mind and body cannot continue long in an atmosphere of chilling repression, constant fault-finding, and lack of cordial understanding. One can easily see, how in the first instance, the attitude of aloofness may have originated in the desire to put down what was wrong in those far-off days; in the anxiety on the part of the well-educated, better class of women who were beginning to take up hospital work earnestly, not to identify themselves in the least with the so-called nurses.

It was not surprising that gentlewomen could not consort with them, or that when appointed to the post of Sister, they were apt to become harsh and tyrannical in their treatment of those who so often proved unworthy. Unfortunately, however, the critical attitude, the ungentle manner, persisted long after the "Sairey Gamp" type had been completely evicted. The early pioneers having struggled bravely through the rough work which was no hardship to the class of women formerly engaged in it, concluded that because they had done so, others should do the same. They had had to work under those who were rough, harsh, uncouth, perhaps unkind, and some of them saw no reason why their successors should be altogether exempt from similar treatment. "We had to put up with it, and why should not they?" was their attitude.

Consequently, for years, a probationer's life possessed many of the attributes of penal servitude. She had to bear in silence all sorts of discourteous, unkind treatment. She was looked upon by the authorities as one altogether outside the pale of social intercourse, and little or no allowance was made for youthful failings, or very human frailties. Her faults were magnified, her virtues under-rated. She became apt to develop the vices of any downtrodden class, and was often deceitful, time-serving, superficial, cunning. As a rule, she went in daily terror of her Ward Sister. A summons to the Matron's office filled her with dismay.

No doubt such a condition of things gave rise to that "hospital manner" so often commented upon unfavourably by outsiders; that curt brusqueness of speech, the cold aloofness of the senior members of a nursing staff from the junior, that is at once so repellant, and so foreign to the true spirit of nursing.

This century is gradually dropping the savage harshness that characterised former ones. More harmonious relations are being established between all classes of society. Do not let it be said that hospitals lag behind in the march of true civilisation, and that even to-day nurses' lives are embittered unnecessarily by the conduct of those in authority over them. Let the "ancient forms of party strife" die a natural death. Let each one of us help by precept and example to "Ring in the nobler modes of life, with sweeter manners, purer laws."

I have left until last what is the most important lesson of all to be learned by the twentieth century nurse from the nineteenth. That is the vital necessity of undertaking such work in the spirit of vocation. Look at it what way you will, the fact remains that nursing is work demanding something more than mere business qualities, more than an active intelligence, more even than human sympathy and kindness of heart. The latter, precious though it is, may be worn very threadbare in the constant daily contact with all sorts of unlovely natures suffering from every variety of trying complaint. Patients are not all grateful, or appreciative, and you will find them by no means ready to kiss your shadow as you pass on your rounds with your night lamp! Sometimes, they are inclined to grumble because they do not immediately get all they want, or they are jealous of the more recently admitted bad case, whom they consider to be unfairly monopolising your time and attention. Their disease may make them irritable, captious, even repulsive. The uninteresting monotony of a long daily dressing may try your patience to the utmost. These people need more than ordinary, everyday good qualities in their nurse. They need one, who over and above her professional ability, looks upon her work as a vocation, "a calling by the will of God." It was that spirit which made the best of the pioneers of other days what they were. Nursing was undertaken by them as a definite life-work. It cost them so much to enter upon it, that they were not likely to throw it up without some very cogent reason. It was a mission in itself. They went into a hospital with the object of making it the scene of their life's labours. Work there was not then considered so much a means to an end. It was the ultimate achievement.

Now, the end of three or four years' training often finds the certificated nurse as restless as she was before. She is eager to make money—to go abroad—to have a change of some kind. She does not often desire to stay where she has been trained. She does not want to train

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