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Editorial.

THE NURSING OF NATIVE PATIENTS.

From time to time the question is raised whether white nurses in South Africa should be compelled to nurse native patients in hospital. Let us say at once that compulsion is not calculated to produce a high standard of work in any profession or calling, and that the sick should not be subjected to the care of those who render it only on compulsion.

But in a hospital where native patients (men or women) are received, this fact should be clearly explained to nurses and probationers applying for vacancies, and if they join the staff, it should be on the understanding that they will be expected to nurse in the native wards if detailed for that duty. If this is distasteful to them, then they should seek work elsewhere. There are some white people, nurses included, who have an instinctive repulsion to those of other colours, a repulsion which in a nurse, upon whom all sick persons have a claim by reason of their sickness, must be regarded as a distinct drawback.

The second reason sometimes advanced, that for a white woman to nurse a black man is to lower her in his eyes is not a valid one in our opinion if the nurse is of the right stamp. Africans, even the most unsophisticated, on the East Coast have an extraordinary delicacy about allowing white nurses to perform nursing duties for them, and will always, if possible, leave their beds and go to the lavatory, rather than allow a nurse to wait upon them, when a white patient, as ill, would take this as a matter of course.

In regard to the employment of native nurses in the native wards, and here again we are referring to East rather than South Africa, though presumably the conditions

do not differ greatly, the difficulty is that the girls available as nurses marry as a rule at about 16 and 17 years of age, and thenceforth have their own duties to attend to, and also the native feeling against employing unmarried native women in male wards is too strong to be ignored even were it advisable to do so.

It is sometimes possible to employ a widow, or married woman, but the best solution for nursing the male native wards is to be found in the employment of young native men under a European Sister. In the performance of nursing duties these young men (or boys as they are usually called) compare very favourably with the girls employed in the women's wards, being gentle, skilful, and capable of keeping instruments in a condition of perfection which would be creditable in a London theatre. Many of them also are deft, though not scientific, masseurs, the art of massage being one of the accomplishments of the East.

But if the nursing in native wards is to be kept up to the standard of an English Hospital, such wards must for some time to come be in charge of Sisters of "the dominant race," for though the native is naturally resourceful, quickly develops dexterity, and works well under supervision, his sense of responsibility awakens but slowly, and discipline and standards would quickly deteriorate in most wards in which natives were left in sole charge. If a race is kept in servitude for centuries it develops but slowly the characteristics of the free-born.

There is no doubt that the training they receive in hospital is invaluable to native girls, the discipline as well as the actual nursing experience being useful to them throughout life, a fact which would-be suitors are not slow to appreciate, for girls with hospital training are in great demand as wives.

[previous page](#)

[next page](#)