

and midwives that, however excellent their technical work, however interested they might be in the care of individual patients, their work was largely thrown away if they did not follow the teaching of Florence Nightingale, and act as health visitors as well as nurses of the sick. It was the honourable province of the district nurse to help to bring the nation back to the observation of Nature's laws, to help to give the babies a fair start in life, and to guide the children up through the dangers of civilisation.

LADY ST. DAVID'S.

Lady St. David's said she had just come from Wales, where they were studying how to achieve a higher standard of health and happiness for the people. In the remote districts of the Principality nurses had to deal with people not accustomed to their services, they had to attend patients 10 or 15 miles from a doctor, and do the best they could for the aged and suffering poor, to teach patients that the fresh air which they feared would give them their "death of cold" was really the "breath of life."

In their work in South Wales in the last twenty months 12 village nurses had already been trained, and 7 were in training. Seventeen new Associations had recently been founded in the Southern Counties, ten of which had chosen to employ Queen's Nurses. The nurses were engaged in the fight against infant mortality, and consumption, and in alleviating the anguish of the world around. It was not to be expected that every nurse should be a Florence Nightingale, but all nurses could bathe themselves in the spirit of Florence Nightingale.

In regard to hours of work, the needs of the patients and also the health of the nurses must be considered. It was no use to build up the health of one section of the community on the bad health of another, but nurses must be prepared to work day and night week in week out.

DISCUSSION.

Miss Elsie Hall thought it risky to leave the arrangement of the hours of nurses to the needs of illness, and the discretion of a Society. The nurse should be protected by rules from overwork. Private individuals and societies were apt to misunderstand what a nurse was capable of doing.

A lady from Bedfordshire said that in the Association with which she was connected the nurses had an hour off duty in the middle of the day.

Mrs. Gilroy inquired whether that was one hour off in the twenty-four.

Miss Hall thought that Associations were not sufficiently particular as to the candidates they selected for training. They seemed to think that if only they found a woman willing to be trained the trainers could turn out an excellent midwife, whatever the material provided.

Miss White, Lincoln, spoke of the low pay received by midwives.

It was also stated that cottage nurses acted as general trained nurses and undertook all kinds of cases.

Mrs. Lawson, President of the National Association of Midwives, said that she had worked in a

district with both trained, and cottage, nurses. In her opinion the latter who had not gone through a true hospital training, often did not understand discipline.

Mrs. Bedford Fenwick said that under all these questions was the great fundamental principle of the value of women's skilled work. It was impossible to get away from nursing economics.

First there was the question of justice to the patient. That was impossible unless efficient, conscientious, skilled labour was provided. Next came justice to the worker, her right to a thorough education. Education was expensive, it was necessary for the worker to give time and labour, and for institutions to provide expert teaching before the skilled worker was produced.

Only twenty-five years ago one year's training was the standard for Queen's Nurses, now three years was demanded of them as well as extra courses to fit them for their special work. That should be the standard for all nurses sent out from any association, whether for rich or poor, in town or country, in tenement or cottage; if any nurse needed extra training it was the one who had to carry her skill into remote districts many miles from medical help.

A wave of responsibility for their poorer neighbours was sweeping over the leisured classes, an awakening of the spirit which inspired Florence Nightingale, for which we should be grateful. The question was how this energy should be applied, and when lay women formed nursing associations, and dealt with nursing standards, Mrs. Fenwick was of opinion that they would do well to secure expert nursing advice on their committees, but it was too often excluded. Nurses desired efficient and high standards, and were not satisfied that nursing work should be done by inefficiently trained women, who were supplied because they were cheap. What would become of these thousands of poor women who were being encouraged by lay associations to consider themselves trained workers? It was, further, poor political economy to employ semi-trained labour at a rate of pay which allowed the worker no margin for saving, and thus for keeping off the rates when past work.

The meeting had heard from Miss Hughes the long list of qualifications necessary for a district nurse, and the services required of her, and nurses were glad that their profession was entrusted with these public responsibilities, and to feel that their work for the community was of increasing value. But if women of the right kind were to be encouraged to adopt district nursing and midwifery as their life's work it was necessary that they should be efficiently instructed and sufficiently paid.

Miss Hughes having replied to the various points raised, the Chairman called on Mrs. Lawson, President of the National Association of Midwives, to read the next paper.

THE MIDWIVES' ACT AND WHAT IT MEANS TO MIDWIVES.

Mrs. Lawson said that the Midwives' Act was necessary, the conscientious midwife of the old school welcomed it, and hoped great things from

[previous page](#)

[next page](#)