

### School Clinics.

The *British Medical Journal* publishes the outline of a scheme for School Clinics for Marylebone, formulated by a Special Committee, of which Dr. G. A. Heron is Chairman, appointed by the Executive Committee of the Marylebone Division of the British Medical Association, which includes the following provisions:—

The centres will be staffed by doctors residing in Marylebone. Each member of the staff will be expected to attend for two hours of one afternoon a week. The staff will be appointed from a rota. . . . One member of the medical staff shall act solely as superintendent of the clinics and secretary to the Committee of Management.

The Committee of Management shall consist of doctors elected by a general meeting of the medical practitioners of the borough of Marylebone. The committee shall have power to co-opt additional members, not necessarily medical practitioners, and who shall not exceed in number one-sixth of the whole committee. One of the members of the London County Council, representing the borough of Marylebone, shall have a seat on the committee.

The clinics shall be open at all times to the inspection of the school medical officer of the London County Council.

The London County Council shall provide the necessary nursing service.

The selection of suitable accommodation shall be in the hands of the Committee of Management. The cost of premises, upkeep and service, shall be provided by the London County Council.

### The Position of Nurses in Germany.

The success of the meeting held by the Women's League in Berlin for the promotion of the well being of women workers (*Frauenwohl*), recently, was such that all those who are interested in the cause of nursing may congratulate themselves on a great step made in the right direction.

The Chairman, Frau Cauer, President of the Women's League, opened the meeting with a few hearty words addressed to the nursing committee in general. She also tendered special thanks to the Foundress of the German Nurses' Association for her promptness in going hand in hand with the women's movement. "Nursing," she said, "is decidedly a woman's question, but not all unions see it in this light." Frau Cauer then called upon Fräulein Reichel, who gave a short address on the position of nurses with regard to legislation. She claims that in this respect the profession of nursing has been badly treated, neglected, and sometimes entirely ignored by lawgivers.

Sister Agnes Karll then spoke on the health conditions of the nurses.

The following statistics are taken from the *Reichsanzeiger* (Imperial State Register). In 1895 the number of female nurses was 43,946; in 1907,

74,986. Of these about 20,000 belong to Roman Catholic orders, about 14,000 to the Evangelical Deaconesses' institutions, about 3,600 to the Red Cross, 1,000 to the *Diakonieverein*, and almost 3,000 to the German Nurses' Association. Very little statistical information with regard to nurses is available. Only State statistics can give a reliable report of the state of health and mortality amongst nurses. Ritter von Lindheim, a member of the Austrian House of Diet, has proved that amongst the Sisters of religious orders, the percentage of those who die of tuberculosis is 66 per cent., whereas amongst the Scandinavian Deaconesses the percentage only reaches 34. The reason of this high rate of percentage is not so much to be found in infection, as in the fact that the Sisters are often overworked, underfed, and insufficiently clothed. They are, therefore, more predisposed to this danger. In England, on the contrary, the percentage of mortality is no greater among the nurses than in any other branch of woman's work, even in cases of tuberculosis. In Germany there is no such statistic inquiry, but the information given by Sister Agnes Karll, the result of a statistic inquiry of the German Nurses' Association, into the health of 2,500 of its members, shows alarming figures. As these 2,500 nurses, previous to the formation of the Union, belonged to religious orders, Deaconesses' houses, the Red Cross, the *Diakonieverein*, and the municipal hospitals, the statistics are typical of the state of affairs in Germany. Of these 2,500 nurses, 1,568 commenced nursing before their 25th year, 2,423 stated that on commencing work they were in perfectly good health. Before ten years of nursing were ended, 986 out of 1,050 nurses were found to be overworked. The average term of service of these 2,500 only reaches 8 6-10 years. The nurses themselves, the doctors, the managing council, and the public, are all to blame for this state of things. The fault lies in the almost universal ignorance about such matters. Till now the nurses have not understood how they could best bring their case before the eyes of the public. Sooner or later nurses will realise that it is their own efforts they must look to for the much needed reform in the nursing profession. In most cases the fault lies in the fact that nurses enter the profession whilst too young to weigh fairly its disadvantages, and soon become so exhausted from over-work that they are too apathetic to consider the true state of affairs. The "*Schweigepflicht*"\* in the mother-house and the idea that the institution will not turn them adrift when old, has much to do with it. Neither are nurses, attached to municipal institutions, taught the value of economics, the aim being to fit them for the immediate wants of the institution they have entered; and though the prospect of a pension is held out to them, it is practically valueless, as most nurses are obliged to leave the institution before they are entitled to the promised pension. In other countries this state of things is unknown. America has never had any nursing religious orders to speak of, and in England they have been super-

\*Compulsory silence as to the existing conditions in the Mother House with regard to clothing, food, hours of service, etc.

[previous page](#)

[next page](#)