

# THE BRITISH JOURNAL OF NURSING

WITH WHICH IS INCORPORATED  
THE NURSING RECORD

EDITED BY MRS BEDFORD FENWICK

No. 1,205.

SATURDAY, MAY 6, 1911.

XLVI.

## Editorial.

### BROKEN CONTRACTS.

Mrs. Jessie B. Davies, Chief Lady Superintendent of Lady Minto's Indian Nursing Association, in a communication sent from Simla on April 13th, endeavours to correct an erroneous impression in the minds of nurses who have thought of joining the Association, and have refrained from applying because of the detailed regulations laid down to protect the Association from financial loss in the case of broken contracts.

We agree with Mrs. Davies it is much to be regretted that women, as well as men, do not in all cases understand or appreciate the full responsibility attaching to an agreement, and that when they fail to keep an agreement, upon which they have entered of their own free will, they should exhibit any resentment over the refund demanded of them.

Women who take up nursing have not, as a rule, had any business training, or the control of a banking account of their own, or they would understand better that no Association, or business, in which a considerable initial financial outlay is undertaken, on a definite agreement that service will subsequently be rendered, could exist at all if those who entered into the contract were allowed to break it without incurring any penalty.

But if nurses do not understand the financial side of the question, they should comprehend that truth and honour demand of them that they should keep their word, and that to break a contract without the consent of the other contracting party, and without defraying any consequent loss is not honourable behaviour.

The statement in a recent Annual Report of Lady Minto's Nursing Association that,

in four years, no less than ten nurses have broken their contracts, seems to have created a feeling of distrust as to the conditions of life under the Association. Such distrust is not warranted by the reports received from members of the Service who write warmly of the kindness and consideration shown to them by the officials, and Mrs. Davies shows that, of the ten nurses referred to, five have severed their connection with the Service for a life "à deux"—obviously a happy reason; another Sister, apparently ignorant of the geographical immensity of India went out thinking she would be near her brother, and another, by no means over robust, found the strain of the long journeys too great. In cases of illness or other urgent domestic reasons, necessitating a return to Europe, a Nursing Sister is able to secure her liberty at the earliest possible moment, and no refund is, in this instance, exacted.

An objection is sometimes raised to the period of the contract—five years—which it has been suggested should be reduced to three. Five years is the usual contract for service in India, and, financially, a shorter period would be impossible, while the continuity of work would be greatly prejudiced, and the value of the nurses' services lessened.

Those who agree to take up nursing work in India should do so with the full realisation that they are assuming new responsibilities, and with the determination to serve the country of their adoption loyally and courageously. We believe that none of those who in an "honest and good heart" elect to serve the sick in our great Indian Empire will regret this decision, but the test at home as to vocation for this special work should be severe.

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