

little more than a girl, had set herself up to be a doctor of sorts, and quite a number of patients were coming to her, some paying, we were told, as much as five rupees (half a month's pay) in spite of the fact that they could have been treated at the civil hospital free. Very soon after this came to my ears she left suddenly, and they said that her name had become stale, as they expressed it, and she had had to go to a new place.

There is no nursing service to correspond to the medical one, though the last few years have seen marked advance in providing nurses, and quite a number of civil hospitals have now Lady Superintendents with a small nursing staff, where formerly the Civil Surgeons had to depend on the patients' relatives and friends for nursing care. Bombay, Calcutta, Madras, Lahore, and other centres have large hospitals with training schools for nurses where European methods of course prevail. These cities have also many European, Eurasian, and Indian nurses of all grades of training working independently, and it is for the classification of these that registration is perhaps most urgently required. It is also necessary to set a minimum standard of nursing education for training schools for Indian as well as for European girls. Most of the missionary hospitals have now small training schools for nurses where very good work is being done, and this would be systematised and unified by requirements for registration.

The lack of nurses in India makes so far very little conscious difference to the masses of the people, because, as I have shown, they cling to their old methods and the majority of them are too poor to employ a proper nurse if one were at hand. To the most of them relief must be brought, if at all, by a gigantic system of visiting nursing. But even those who could pay a nurse rarely appreciate the advantage of having one, and nursing duties are delegated to various members of the family, sometimes, it must be confessed, with marked success.

The fact that by registration nursing would be given a Government status would almost certainly help to remove some of the causes which militate against the supply and employment of Indian nurses. Let me mention some of these: First, nursing is not looked upon as an end worthy of attainment. Even among Europeans there is the same misunderstanding in regard to it, one old gentleman said to me that he was surprised that I did not go out to India qualified, meaning as a doctor instead of a nurse, and once when I had to take the doctor's place in the dispensary for a few weeks the helpers began to ask among themselves how long the Nurse Miss Sahib would have to

write at the table before she could become a doctor. Principals of schools and orphanages offer girls who can never make teachers as suitable material to be trained as nurses, and really bright girls who are interested in the care of the sick usually take a short medical course and become medical assistants. It is rather disconcerting to a girl who has been doing faithful work in a hospital for four years, and is becoming a really trustworthy nurse, to be reminded that she has worked four years and is nothing at all, and if she had gone to Agra for two years instead she would have been a doctor.

It does not seem possible yet in India for young women to go about among their own people, and those who are trained in our hospitals must either work on in hospitals where they will be under the supervision and protection of other women or go to take charge of sick children in orphanages, where they will have the same protection. A European nurse told me that when she was leaving an Indian patient where the conditions were not at all suitable for an English woman she suggested to the Brahmin master of the house that he should get a native nurse. He said he would not think of such a thing, as they were all fallen women. It is quite true that this is the general opinion in regard to all those who go about independently among the people. This very stigma makes it extremely difficult for a woman to retain an unsullied character in such work, and a complete change of attitude toward the nurse will be necessary in Indian households before it will be safe to be a nurse in this public sense. I was told of one midwife whose husband accompanied her to the house whenever she went to attend a case in order that it might be understood that she was a good woman. The deep respect of the people for the nurse and her work may be all the protection she will need when she wins that, but how is that to be done? Various philanthropic societies are doing much to inculcate a spirit of service which will be certain to improve the position of those who give themselves to service for others. Prominent among them is the Seva Sadan, or Sisters of India Society, which is giving much attention to the care of the sick, and should be able through its nurses to set the seal of respectability on the nurses' calling.

It will perhaps be a great many years before it will be possible to make it illegal for a nurse to practise unless she is trained up to a certain standard. As yet any man who likes may set up a little drug shop and call himself a doctor, and until the doctors succeed in protecting themselves and the people, by allowing only properly qualified physicians and surgeons to

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