

practise, nurses will perhaps be considered Utopian dreamers if they hope to protect the people from nursing which is not worthy of the name. Registration, when it comes, will be a separate matter in each Province, as it is in the separate States in America, and the competition of one Province with another to obtain the best system of examination and registration will probably exert a wholesome influence on the whole. Meanwhile, there are various associations which are working hard in India, some from the standpoint of the nurse, and some from that of the public, to improve present conditions and provide adequate nursing care for the sick. Nurses themselves have two associations, the Trained Nurses' Association of India and the Association of Nursing Superintendents of India. These Associations are making a great effort to bring together all the trained nurses in the country, of whatever race, and they form a centre from which methods can be discussed and new movements started. *The Nursing Journal of India* is a monthly magazine published by these Associations. Lady Minto's Indian Nursing Association, the Lady Ampthill Nursing Institute, Queen Alexandra's Military Nursing Association, and various associations connected with individual hospitals for supplying nurses are all doing much to make nurses respected in India, and connection with them is a guarantee of a proper training, as only fully-trained nurses are accepted in these services. The newly-organised Bombay Presidency Nursing Association, while its rules leave much to be desired from the nurses' point of view, is still the forerunner of registration, for each nurse holding the Association's certificate will be registered by Government. It may be impossible for a long time to keep individuals from employing untrained nurses, or to forbid untrained people to nurse, but in the Bombay Presidency positions in the affiliated hospitals and private work in the nursing associations will be limited to fully qualified and registered nurses. There is to be no distinction of race, and any nurse who comes up to the requirements may be admitted, whoever she is. I quote from a paper on the Bombay Presidency Nursing Association, read by Miss Tindall, of the Cama Hospital, at the Annual Conference of the Nursing Associations:—"Every other Province is already affected by this Association, in that, as it considers that nowhere in India is there a proper system of training for nurses, and it will not receive into its posts any nurse who has not gone through such a training, the Bombay Presidency is closed to all Indian-trained nurses outside the four Presidency hospitals recognised by the Association, unless

any candidate is willing to sit for the final examination and passes it, she having had three years' training in a hospital of sufficient repute. I think when this becomes known and fully grasped the other Governments and hospitals will not like to feel that their nurses are not considered sufficiently taught and trained to be admitted to the Presidency, and will therefore follow the lead of this Association and insist on a certain uniform training and examination."

Only among rich and well-educated Indians would the argument of protecting the public by means of registration have much effect, as a nurse with even the most rudimentary or careless training would be better than their ignorant and superstitious *hakims* and *dais*. But in India most social improvements have to be introduced, if not against the will of the people, at least in spite of their indifference, and we must not rest while the people are content with the present conditions. The only ones who will suffer from a system of registration are young nurses with incomplete training, and it will be for their good to be compelled to complete it, and the older partly-trained women and *dais*. For their sakes it will be necessary perhaps to eliminate all but registered nursing from the country by a slow process of evolution.

In conclusion, therefore, we are seeking registration in India for the same three reasons that it has been, and is being, fought for everywhere, for the sake of nurses themselves, that they may be assured a thorough training and the position of respect which their service deserves, and which is so necessary in India for a nurse's protection; for the sake of the doctors, that they may secure more competent and trustworthy co-operation in their wonderful work of preventing and healing disease; and lastly, though first in importance, because it is the greatest good for the greatest number, for the sake of the people themselves. Lord Curzon, speaking at the Mansion House a few weeks ago, reminded his hearers that, as he had said many times before, we English people are in India for the good of the Indians, and that is our only reason for being there, and he further added that when we cease to hold that ideal the sooner we are out of India the better. If we nurses who go to India from Western lands keep this ideal before us and those we train, subordinating personal advancement or dreams of wealth picked up at Oriental courts, or in large fees from rich merchants, then not only thorough and conscientious individual work must be our aim, but membership in a well ordered, efficient, and respected department of public life.

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