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**EDITORIAL.**

**DISTRICT NURSING AND THE STATE.**

Of all the different sections of nursing there is probably none in which thoroughly trained nurses are doing more effective work for the community at less cost than in district nursing. Queen's Nurses, for instance, in the United Kingdom—women with a three years' certificate of hospital training, and special district training in addition, and who are often certified midwives as well, and who receive a modest salary of £30-£35 a year—not only nurse the sick and dying with skill and devotion, but throughout the length and breadth of the land are raising the standard of national health by inculcating lessons in hygiene, as they do their work in the homes of the poor, by practical example as well as by precept.

In this country we leave the support of district nursing organisations to private charity—and very cold charity it often is, too—just as we leave our voluntary hospitals to the benevolence of the public, but in Australia and New Zealand the State, recognising the value of hospitals, subsidizes them pound for pound, thus stimulating, and effectively assisting, voluntary effort.

It seems only consistent that the system of State assistance which is applied to the hospitals should be extended to include the support of district nursing, and this the Council of the New South Wales Association, concerned with the supply of Bush Nurses to outlying districts, has not been slow to discover.

As we report in another column, a deputation from the Association recently placed the claims of district nursing to State support before Mr. Holman, the Acting

Premier, and received a most sympathetic hearing. Mr. Holman said:—

The establishment of Bush Nurses would be a radical advance in the organisation of medical aid throughout the country, and it had his complete sympathy. He recognised the force of the arguments used, that the Government ought to do something to give the residents of sparsely populated districts the safeguards and advantages which this scheme offered. It was really a matter of wonder that heads of families should venture with their wives and families into the new lands, thrown open for settlement, where medical assistance in an emergency could not be secured. Any proposal which would result in lessening the risks of these pioneers would receive the most careful and sympathetic consideration of the Government. He was sorry he was not able that day to give them any definite answer. He had hoped before meeting them to be able to consult the Chief Secretary and learn how this scheme blended with his own scheme of Hospital Management. But the pressure of business in Parliament, and in his own department, had prevented him from doing that. He hoped, however, within the next two or three days to be able to let them know how far the Government would be prepared to back the Bush Nursing scheme, and to assist the district of Jindabyne, which had been the first to take up the work. Personally, he was in sympathy with the project, and saw the force of the argument that the Association should be placed on the same footing as a Hospital. He would see whether the Government could not include a sum in the next Estimates, which would enable the movement to be extended to the sparsely-settled areas.

This opens up vistas of endless possibilities for district nursing in the future.

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