

their financial support. He had, he said, served for thirty years in the tropics, and realised how much good nursing was needed. Recently he had served in West Africa, where, very rightly, the Association sent most nurses. He would like to see their pay raised in the Colonies, and something more done for them when they came home. Their health was sorely tried, and they needed a thorough rest before returning to work or taking up fresh work. He would like to see the sick-pay fund much larger than at present. Every year the work in tropical countries was expanding, and it would make the nursing service more popular if the health of the nurses was looked after when it was impaired.

Dr. J. M. Atkinson, Principal Civil Medical Officer in Hong Kong, who proposed a vote of thanks to H.R.H. Princess Henry of Battenberg, said he had had many opportunities during many years' work in Hong Kong of observing the work of the Colonial Nursing Association. It was a blessing to the Colonies, and many a life had been saved by the services of the nurses, who needed special qualifications to adapt themselves to new conditions of work.

Lord Ampthill, in seconding the resolution from the Chair, said that for those who wish to assist the work of the Empire there was no better way than by supplying nurses. They might, it was true, be supplied by a registry office, but in that case we should lose the opportunity of showing sympathy with those in our distant colonies. The work of the Association was one of love, not of business, and an advantage was that it kept in touch with the nurses it supplied. Her Royal Highness, who knew how important the work was, had given the Association her continued interest and support, and he moved that a vote of thanks be respectfully tendered to her. This was carried unanimously.

Mr. Frederick Dutton, Treasurer of the Association, in proposing a vote of thanks to the Duke and Duchess of Devonshire, said that if the funds were larger the Association could send out more nurses, and also offer more liberal terms to them. They had almost invariably to carry on their work under trying climatic conditions, and it became increasingly difficult to obtain the services of nurses of the highest training and ability.

M. B.

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### A REGISTRATION "AT HOME."

Lady Helen Munro Ferguson, who is At Home at 46, Cadogan Square on Friday, June 21st, to consider Nurses' Registration, has invited the following ladies to speak: Miss Cox-Davies, Miss H. L. Pearse, Miss Sidney Browne, Miss Musson, Miss Mollett, and Miss B. Kent. Mrs. Bedford Fenwick will reply to questions on the various speeches.

## NURSES AND THE INSURANCE ACT.

### WHERE TO INSURE.

Arrangements have been made whereby Irish and Scottish nurses can form their own Approved Societies in peace—not so in England. We are never permitted to manage our own financial and professional affairs without a fight. A plain statement concerning our position would therefore appear advisable. As soon as the Insurance Bill was introduced into Parliament the Managers of the Nurses' Pension Fund took very active steps to have it amended so that they could start a Nurses' Insurance Society and thus assume the control of the personal and State contributions of nurses. Men were to be admitted to its benefits and all other hospital and institution employees.

Upon studying the Bill, a strong committee of matrons, interested by Mrs. Fenwick and Miss Mollett, formed themselves into a Provisional Committee, and were at once alive to the unfairness of women joining men's societies—unless they were of the artisan class who married men who are compulsorily insured, and who would enjoy the maternity benefit—the reason being that the maternity benefit will be one of the greatest drains on the funds.

We argued that trained nurses would seldom marry into the insured classes, that is persons with an income of less than £160 a year—that their work and needs were special, and that they therefore required an Approved Society specially organized to meet those needs.

Although the Pension Fund Managers professed to think otherwise, they quickly adopted our policy and dropped the male contributor and advertised their society as for women only. We still insisted that the best Approved Society for nurses should be for trained professional women only, and in the prospectus of the Pension Fund Scheme, by which the hospital world is at present flooded, the distinct statement is made that the Society "is open to all Women Nurses—and Women Nurses only."

Now this statement is not accurate. The Pension Fund Scheme is prepared to insure all "engaged in attending the sick and suffering," in whom are included:—

Trained Nurses and Probationers,  
Village Nurses,  
Cottage Nurses,  
Sick Attendants (usually untrained), and  
Midwives.

Thus it will be seen that the scheme includes partially trained and untrained nurses, and midwives who are not "women nurses" any more than they are women doctors, but who as a "certified" class should have their title included in the name of the Society with that of nurses. The important principle here involved is that village and cottage nurses and the majority of sick helps are recruited from the artisan class—who marry into their own class of compulsorily insured men.

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