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EDITORIAL.

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THE INCREASED COST OF LIVING.

We are constantly hearing of the increased cost of living, and of recent years the cost in this country has gone up by leaps and bounds. Yet, so far, the remuneration of trained nurses remains stationary. The salaries of probationers are merely a pocket money remuneration, and staff-nurses and sisters earn little more than from f_{25} to $\pounds 35$ per annum. This we know is a very tight fit. In private nursing, the £2 2s. fee, less in the country, is still the same as it was in the eighties—when everything was far less costly. Not only so, but as trained nurses have been denied State protection, after pleading for it for a quarter of a century, their field of labour has been over run and largely absorbed by the unqualified, some of whom demand the highest fees for unskilled work, whilst others are content to undersell at beggarly rates, the remuneration of skilled nurses. This competition being very keen (especially as the hospitals most ungenerously look on private nursing work as a justifiable means of revenue), there is little prospect in this country of even a small rise in salaries to meet the increased cost which will result from the National Insurance Act in every particular. The policy of the "charity" employer to keep the nursing profession unprotected and disunited, and the apathy of the nurses in condoning such a policy, must be blamed for this sorry economic condition.

At the other side of the world, where trained nurses appear to possess a keener sense of professional feeling, and where, at any rate, they are alive to the fact that the labourer is worthy of her hire, this question of increased fees for private nurses is now under discussion. The initiative was taken

by the Royal Victorian Trained Nurses Association, which after consideration passed the following resolution :---" That the Council of the Queensland Branch is of opinion that, in view of the fact that many nurses have to provide for old age out of their earnings, and that their employers are frequently wealthy, and of the greatly increased cost of living, and of wages and salaries in general, the fees of private nurses might be raised without injustice or detriment to the public, and with a further advantage to the nurses; and that this rise should be on the basis of a sliding scale, allowing for a smaller fee for long cases, or when two nurses are employed, or other special circumstances.'

This resolution was forwarded to Sydney to the Australasian Trained Nurses Association, the Council of which decided that it should be submitted to the members themselves at the Annual Meeting, and that meanwhile the views of the State Councils of the Association should be ascertained.

The Australasian Nurses Journal is not sure that to raise their fees might not after all be injurious to the average private nurse. It argues, not without reason, that as at present almost all nurses engaged in private nursing find more than sufficient work the whole year round, they may be in less request by the public if more has to be paid for their services. Many families will be forced to do without nurses during sickness; and if trained nursing is imperative, either the services of the nurse will be dispensed with at the earliest possible date, or an untrained woman who has some experience in nursing will be called into requisition and thus another class of workers in the nursing world will arise. Again many people will prefer to send their sick to the private hospitals, which would prove less expensive now that food and domestic help is so hard to obtain. So that the private hospitals

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