

## THE NURSING AND MIDWIFERY CONFERENCE.

(Continued.)

MAY 1st.

AFTERNOON SESSIONS.

### MENTAL AND NERVE WORK.

Dr. Murray Leslie presided at the first Session of the Nursing and Midwifery Conference, at the Yeomanry Hall, Elverton Street, S.W., on Friday, May 1st, and in his opening remarks stated that the members of the Conference had been delighted to hear that tuberculosis was diminishing, but mental and nerve troubles, and cancer, of which they were to hear that afternoon, were not diminishing. A eugenic consideration, in connection with these subjects, was—should nervous people be allowed to marry? The position of the nurse in the care of mental, nerve and cancer patients was an extremely important one.

He then called on Dr. Robert Armstrong Jones, Resident Physician to the London County Council Asylum, Claybury, and Lecturer on Mental Diseases at St. Bartholomew's Hospital, E.C., to read the first paper.

#### THE PROGRESS OF MENTAL NURSING.

Dr. Jones said that the Claybury Asylum, the first built by the London County Council, was opened for patients in the year 1893, exactly 100 years after Pinel had removed the shackles of mechanical restraint from those wretched human beings incarcerated in the Bicêtre in Paris. This was the first blow struck at the barbarous treatment of the mentally afflicted, and from this date the iron fetters which restrained their limbs came to be looked upon as not only unnecessary but absolutely cruel.

After saying that the Bicêtre was in that revolutionary time a vast pandemonium filled with miserable creatures, some insane, others criminals, whose condition was a disgrace even to that period of intolerable tyranny, Dr. Jones stated that the condition of our own Bethlem Hospital, with its Bridewell dependence, was no whit better. It was open on Sundays so that visitors might inspect the patients in strait waistcoats, handcuffed or roped to the floor, bedded at night in dark cells with straw for a bed like cattle, flogged and whipped for their excitement and most revoltingly treated by "keepers" who were persons of the lowest class, often themselves criminals. Not less than £400 was received in one year in fees from sightseers at the Bethlem Hospital. Medical treatment was equally cruel and indiscriminate. Dr. Jones expressed the opinion that it was the revolt against the treatment of the insane at this time which gradually caused a reaction in favour of the sympathetic treatment of those who were bodily sick, which culminated in the departure of an illustrious and devoted woman with a faithful band of thirty-eight nurses for service in the Crimean War. The life

and name of Florence Nightingale had been the mainspring and the pivot of the greatest progress in mental and sick nursing which the world had seen. In the asylum of to-day the neat and well-clad patients lived in large, warmed, well-ventilated and well-lit rooms, bright and gay with plants and palms, and the environment was a panorama of pleasant impression, affording cheerful stimulation to the senses, in place of the gloomy, cheerless, and depressing surroundings of the past.

This was not the only progress. There was an immense improvement in the nursing and this because insanity was to-day considered to be a disease and not a doom; a bodily disorder to be cared for, and not a demoniacal possession to be exorcised, a condition which needed sympathetic oversight and considerate attention, one which needed skill and training rather than passive tolerance and neglect. Our changed notions about insanity as a bodily illness had changed our ideas of treatment, and the fact that an insane person was an ill person made it possible to nurse the insane in the best meaning of the term. We now no longer questioned that the restless suspicion and the unreasonable conduct, the excitement and the violence, the abusive conversation, and the disagreeable habits of the insane, were due to other than bodily illness, and that they were conditions which were often associated with exhaustion, or with poisons of various kinds circulating in the fluid which surrounds the nerve cells; that the mental symptoms, the hallucinations and delusions were due to physical states which were abnormal and that nursing in the best sense was needed before the brain and the other organs of the body were able to obtain suitable and normal nourishment for the performance of their proper functions.

The speaker went on to say that the duties of a mental nurse were probably the most difficult as well as the most responsible and trying that any man or woman might be called upon to perform. It mattered not how kind or how tender or even how sympathetic a nurse might be unless her perceptive faculties were quick, and she had learnt by experience to apprehend reasons for changes of conduct, unless she had learnt to place herself wisely in harmony with her patient, she could not be a good mental nurse. She should possess the gift of saying and doing without hesitation or effort exactly the right thing in the right way at the right time. If she had not tact—essentially a head quality—she had better not undertake the responsibility and the duties of a mental nurse. It was by the force and power of her own character that the mental nurse could assist her patient to regain the sense of what was impaired or lost, and it was her worth as a nurse in this respect which was her best asset to promote self-respect in others around her.

Dr. Jones explained that the immediate object of the systematic work and exercise which now formed part of the treatment in mental hospitals was not the value of the labour so much as the

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