

A BABY'S TRAINING.

Miss Cleone E. Hobbs, R.N., of Greenboro, N.C., in a paper read before the local association of nurses, and reported in the *American Journal of Nursing*, said in part:—

“Someone has said that the essentials for a happy life are health, work, and friends. Most of us have work and there are few who are totally without friends, but do we all have health?”

What do you consider the first requisite for health? I would say knowledge. Mothers and fathers should know how to teach their children to live normally. It used to be said that “the hand that rocks the cradle rules the world,” but we have learned that it is wrong to rock the cradle, and the wise mother will put brakes on it. We might change the saying to the one who trains the baby rules the world.

A baby's training begins as soon as it is born into the world. The three important points in training a baby or in nursing a sick baby—or a sick adult, for that matter—are cleanliness, quiet, and regularity. Any sensible person knows this.

What more discouraging picture can you call to mind than the first two or three days on a private case with a sick baby of two years, or two sick children; household disorganized, mother nervous, incompetent, noisy, prejudiced against the nurse; jealous if the baby shows any signs of coming over? Here a nurse has to bring all her powers of self-control, knowledge, and training.

Of the three points I have mentioned—cleanliness, quiet, regularity—I verily believe quiet is the most important. Certainly without quiet the other two cannot be attained. I believe noise is one of the curses of the age. How many of us could answer to King Lear's description of his daughter when he said “Her voice is sweet, gentle, and low, an excellent thing in woman”?

The nurse [and the midwife] has an excellent opportunity in the first month of an obstetrical case to lay the foundations of a child's education by training both mother and baby in regular habits and self-control. In saying this I do not mean to speak disparagingly of mothers, for there are many who study child culture and keep up with what is being learned, but, on the other hand, it is no sign that a woman is competent because she is a mother. There are many who spend more time and thought on their children's adornment than on their food or mentality. If a nurse is thrown with a mother like that it is her duty to teach

her. If the nurse has studied and read books on child nature by the great teachers, such as Froebel, Sequin, and Montessori, she will be able perhaps to present knowledge to her in a way that will not offend and that will leave her searching for more knowledge, and there will be opened to her new realms, where the feeding of a little child's body is a sacred rite, inasmuch as improper feeding may foster a weak and vicious mind.

We, as nurses, should appreciate the high place we occupy, and try to realize the opportunities we have to help make this a better world. Often mothers ask about their babies. That is your opportunity: when you are asked. When we volunteer advice, people are often in the wrong frame of mind to receive it, and many of us make ourselves obnoxious by giving advice at the wrong time. It makes us appear pedantic and conceited, and does harm rather than good. “Knowledge without goodness is dangerous.” Nurses should have some idea of psychology as well as physiology.

Nurses should also know a great deal about foods. A graduate of five years said to me: “I never did know anything about cooking and housekeeping: I don't like it anyway.” (She had not passed the State Examination.) I wanted to know how she managed about her patients' diet. “Oh!” she said, “My cases are generally typhoid, and I only have liquid diets to prepare.” Do you wonder that we have many adverse criticisms about nurses?”

QUEEN'S NURSES AND INSURED MATERNITY CASES.

At the quarterly meeting of the Committee of the Victoria Nursing Association, Brechin, N.B., a communication was read from the Scottish District Training Home pointing out that for many years the Queen's Nurses had given attendance gratis to maternity cases, but seeing that such cases were now provided for under the Insurance Act, it was felt that, while their nurses should still be allowed to attend them, a small charge should be made. The Committee agreed that patients wishing to employ a nurse should pay a sum of 2s. 6d. or more. This raises an important question in economics, as the midwife or maternity nurse working “on her own” could not earn a living wage on fees calculated at this scale, and the danger is that she may be undercut.

BELGIAN MOTHERHOOD.

Mr. A. Rowland Harris, of 10, Temple Avenue, E.C., in connection with his Refugee Belgian Mothers' Association is prepared to forward, entirely free of any cost, a complete baby outfit to any and every refugee Belgian expectant mother who may be in need thereof. Applications should be sent to 10, Temple Avenue, E.C.

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