

may bring a healthy child into the world? Is there, indeed, any guarantee that she has so much as learnt the self-discipline that the training for any real vocation gives?

My contention—shall I say our contention?—is that the trained nurse is the right person for this work; but even her training is not of itself sufficient. I would suggest that a three or four years' training in hospital or infirmary should be followed by a course in preparation for the Health Visitor's Certificate, or that of the Sanitary Inspectors' Board, with some training in social work or experience in district nursing. The certificate of the Central Midwives' Board is an advantage, but to my mind is not indispensable. The infant welfare worker, or the public health servant is not the proper person to deliver the lying-in woman, and should have nothing to do with the mother or the child during the lying-in period. The mother should be left entirely to the care of her best friend—the midwife for that sacred ten days. The fewer visitors she sees, besides her own people, the better for her nervous stability and that of her child.

In my opinion a health visitor or infant welfare worker should be over thirty years of age, rather than under. She is much more likely to have weight in advising the mothers, and her larger experience of life will help her to know how much not to say and to teach, seeing that she is for the most part dealing with people whose capacity for absorbing knowledge has been dormant for years, or has, perhaps, never been awakened at all.

Few of us go into the homes of the poor without realising the pent up floods of resentment that are boiling and surging in the hearts of both men and women who have been subjected to injudicious and impertinent meddling.

The infant welfare worker must have a trained mind, method, tact; a highly cultivated power of observation, a balanced judgment. The V.A.D. may have gained some, or even all of these, but the work needs a wide knowledge of disease and the power to detect it; and, no less important, the knowledge of how to deal with people not under authority. Soldiers, it is to be supposed, are under discipline. Mothers are *not*. Therefore, we nurses, as a body, must secure the recognition that the training required shall comprise:—

Training in a general hospital, including special experience with children.

Training in sanitary science.

Training in social science, or experience in district-nursing.

The infant welfare worker ought to be a blessing. We must see to it that she is not a curse.

This paper was received with warm approval.

A PUBLIC HEALTH NURSING SERVICE.

The next paper was presented by Miss Alderman, who reminded her audience that Dr. Saleeby had said that the chief functions of a Ministry of

Health were to learn, to teach, to guard and to help. Those engaged in public health work must realise the importance of giving the people the right kind of teaching; the greatest need of Public Health was for competent women to do the teaching. Symptoms of illness must be observed, the work of obtaining treatment organized, and that of giving help in case of necessity co-ordinated. Preventive work covered a very wide field and was at present very inadequately done.

The chief activities of Public Health Work were: (1) Infant Welfare, Maternity, Midwifery; (2) Tuberculosis Work; and (3) School Work.

The three years' certificate of general training being laid down as a minimum, preference should be given (1) to those holding a C.M.B. certificate; experience in baby feeding was also essential; and for a position involving the inspection of midwives, the Inspector should have had considerable experience in practical district midwifery.

(2) For tuberculosis work additional experience in nursing acute cases of phthisis or district nursing, or private nursing, was a great asset.

(3) For school work additional experience in a children's hospital or fever hospital was essential.

Clerks ought to be provided for clerical work.

The visiting of homes, the condition of adults and children, the weighing of babies, the reporting of symptoms, were essentially the work of nurses. We had no right to send incompetent, partially trained people to visit our poor, or our working classes.

The Public Health Nursing Service ought to have proper recognition as a Government Service, and a Board should be appointed for Selection and Promotion to which nurses should send in their applications, and appointment by local authorities and their medical officers should be abolished. They never desired this duty and it had been thrust upon them.

The members of the Service should have proper recognition as Public Health Sisters, with salaries commencing at £200 a year and uniform allowance, and promotion to the administrative posts should be on length of service and results obtained.

New workers might begin in centres with a large Public Health Department, and after working some years in an industrial area they should be given the chance of a change of work.

In England there were quite enough training schools, each of which should have a Department for post-graduate Public Health Training.

DISCUSSION.

The question is a very live one at the present time, owing to the announcement that money subscribed by the public to the British Red Cross Society and the Order of St. John of Jerusalem, for the benefit of the sick and wounded is to be given to provide scholarships for V.A.D.s to qualify (amongst others) after a short training, for posts as health visitors and welfare workers.

A lively discussion followed, the opinion being

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