## COMING EVENTS.

October 27th.—Royal British Nurses' Association. "At Home" in honour of Miss Kathleen Smith, R.R.C., new Matron of the London Temperance Hospital. 194, Queen's Gate, S.W. 4 to 6 p.m.

October 28th.—General Nursing Council for England and Wales. Meeting, Ministry of Health, Whitehall, S.W. 2.30 p.m.

Whitehall, S.W. 2.30 p.m. October 29th—Royal British Nurses' Association. Lecture on "Napoleon," by Mr. Woodrow, Hon. Secretary to the Napoleon Coterie. 194, Oueen's Gate, S.W. 3 p.m. Admission free. Tea, 15.

November 3rd.—Memorial to Scottish Nurses who gave their lives in the Great War. To be unveiled and dedicated. St. Giles' Cathedral, Edinburgh. 2.30 p.m.

Edinburgh. 2.30 p.m. November 5th.—Royal British Nurses' Association. Concert. 194, Queen's Gate, S.W. Admission free. 8 p.m.

November 6th.—Memorial to Irish Nurses who gave their lives in the Great War. To be unveiled and dedicated. Garrison Church, Dublin. II a.m.

## LETTERS TO THE EDITOR.

Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not IN ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.

## INDIAN WOMEN AND NURSING.

To the Editor of The British Journal of Nursing.

DEAR EDITOR,—I read with much interest the report of the Lady Hardinge Medical College Hospital, Delhi, in your issue of the r5th inst., but I feel I cannot let it pass without commenting upon one passage in it.

I refer to the statement that "Indian nurses, generally speaking, are lacking in reliability, thoroughness and energy."

To my mind this is a very unfortunate statement to make at the present time in a nursing journal which circulates in India, where the problem of nursing as a profession for Indian women is a very vexed one, and the supply is unequal to the demand.

Many efforts have been made from time to time by various people to bring home to Indians the great need for skilled nurses for their sick. This is not entirely a matter of caste prejudice, since large numbers of well-educated women yearly enter the medical profession, while practically none from the same class consider nursing as a profession.

One of the most active workers in this cause at the moment is Lady Rogers, herself a trained nurse, who founded in 1917 a hostel for Indian nurses in Calcutta, with a view to rousing public spirit.

But in spite of all the efforts that have been made, it still remains a fact that the need for skilled Indian nurses for the Indians is not being met, many small hospitals in the country districts

having no nursing staff at all, while few patients in their own homes have the benefit of trained hands and minds.

It seems to me, therefore, a matter for regret that the statement referred to should appear in a nursing paper. It is not calculated to encourage anyone, and will certainly be hurtful to the feelings of many capable conscientious women who have struggled hard against difficulties unknown to Western minds in order to obtain their training. From personal knowledge of Indian nurses I can speak very highly of their gentleness, kindness and unobtrusive devotion to the sick, and their eagerness and painstaking efforts to acquire knowledge.

Reliability and thoroughness are largely the outcome of early training and environment, and may call for more than an ordinary amount of patience on the part of a sister to develop during training; . while "energy," being largely the effect of climatic influence, can at best be guided, a fact which the energetic English Sister will do well to bear in mind, lest in her ignorance she should peradventure attempt to turn the East into the West.

It certainly remains without doubt the duty of every British nurse in India to do all in her power to encourage—and not discourage—Indian women to come forward and take up their share of the burden of Empire.

The following questions might well be borne in mind by all interested in the matter of the inadequate supply of skilled Indian nurses, with a view to solving the problem :—

Is it caste prejudice ?

Is it lack of ideals?

Is it ignorance of the necessity for skilled nursing for the sick ?

Is it entirely a matter of economics?

And do the large hospitals offer every facility for training to well-educated high caste Indian women?

Yours &c.,

EMILY C. SWISS.

To the Editor of THE BRITISH JOURNAL OF NURSING. DEAR MADAM,—I have to thank you for your

courtesy in printing the note on the Lady Hardinge Medical College and Hospital for Women, Delhi, India.

Yours truly,

L. E. MACKENZIE, Superintendent of

Training School for Nurses.

Lady Hardinge Medical College . Hospital, Delhi.

POOR LAW GUARDIANS AND THE G.N.C.

To the Editor of THE BRITISH JOURNAL OF NURSING. DEAR MADAM,—I notice in your "Nursing Echoes" an allusion to some remarks which I am alleged to have made at Cambridge. I am in general agreement with what you say, but the point on which I was speaking was that some nurses are trained in Voluntary Hospitals and some in Poor Law Institutions, that the conditions of training differ, that while heartily approving of the idea of improving the education and standing



