

THE ORGANISATION OF NURSING IN INDIA.

To keep in touch with the progress of nursing in our Empire is not only a pleasure, but a duty of nurses in Britain (the wellspring of the modern system of nursing all over the world) and every step taken to help the health of the people of India is of paramount importance.

We have read with great interest an article which appeared recently in *The Times of India*, from which we quote as follows:—

THE PROFESSION AND ART OF NURSING.

The profession and art of nursing form one of the blessings which Western civilisation has bestowed on India. In old days, and even now, apart from Western influence, we find no evidence of any attendance on the sick superior to that of the dai or handy woman who goes from house to house carrying out her own ideas of treatment or who remains if required for more prolonged attendance. She is, however, illiterate and untrained, and there has never been any movement among the people for organising and improving this rough service and putting it on a footing which would make it generally useful to the community.

The first beginnings of nursing in India came with the appointment of a matron to the Madras Maternity Hospital in 1844; ten years later the training of midwife probationers was definitely begun, and in close upon seventy years following that well-known Hospital has passed out midwives of whom 2,373 were Europeans or Anglo-Indians and 72 were Indians. In 1859 the Calcutta Hospital Nurses' Institution was started to provide nurses for the large Calcutta Hospitals. Nursing sisters were brought out from England, but the training of probationers was begun at once. The Jamsetjee Jijibhoy Hospital, Bombay, and the General Hospital, Madras, began the training of nurses in 1870 and 1890 respectively.

The nurses trained in these institutions were, at least until quite recently, Europeans or Anglo-Indians, and the cause of this is not far to seek. Education among Indian women has been, and still is, very backward, yet since the reformation of nursing in England after the middle of last century a good general education has been the *sine qua non* for probationers. Not only so but the whole trend of thought of the Indian people disapproves of women, except perhaps of the lowest class, coming forward to take up positions in institutions in which teachers, students and patients are men. Were it not for this, one can imagine that the profession of nursing would appeal to Indian women who are deft, skilful, and sympathetic in their ways.

Central Board Required.

Training of Indian nurses began in Mission Hospitals during the seventies. In 1885 and 1886 respectively, the great Nursing Schools in the Dufferin Hospital, Calcutta, and the Cama Hos-

pital, Bombay, were opened. As years passed, the standard of hospitals improved, more Nursing Sisters became available and many women's hospitals took up the training of Indian nurses. Information made available by the Countess of Dufferin Fund shows that up to the present time, so far as returns can be trusted 1,262 Indian and 1,250 Anglo-Indian nurses have been trained, and that 478 Indians and 379 Anglo-Indians are now under training.

Not very much can be said about the standard of training of these nurses. At first tests of efficiency were purely local and no doubt differed according to the standard of the medical men or matrons in charge. The Bombay Presidency was the first to institute a Nurses Examination Board which sets a definite standard of training and conducts independent examinations. Other Provinces and some Missionary Societies have followed this example until now there are at least a dozen such Boards, all with varying standards and varying requirements which cannot fail to confuse the public. It is of great importance for the future of nursing in India that a Central Board should be formed to affiliate all these local organisations.

Organise the Nursing Profession.

It is also of great importance to render nursing more popular and to remove as far as possible the difficulties which prevent Indian women from taking it up. It is now generally recognised that skilled nursing is a necessary accompaniment of medical and surgical treatment. As regards hospital treatment, in England four beds per 1,000 of the population is looked upon as necessary. In these hospitals one nurse per five beds is required or, if the hospital is for maternity patients, one nurse for three beds. If we strike an average and say we require in India one nurse per four beds we should want, for hospital work only, one nurse per 1,000 of the population. A simple exercise in arithmetic shows the immense number required, and this is for hospitals only in addition to those required for private nursing for childbirth, for factories, schools, infant welfare centres, &c., &c. If these requirements are to be met, on the fulfilment of which the future health and prosperity of the people depend so greatly, a real national movement is needed and the first step is to organise the nursing profession so that Indian women may be able to enter it freely. The present is a good opportunity to take up the question as, owing to the economic situation, Indian parents are more anxious than before to train their daughters for fairly lucrative professions, while Indian husbands are ready to allow their wives to work and contribute to the family exchequer provided the conditions are made possible to the continuance of family life and to a respectable career.

The Lady Reading Fund.

The Lady Reading Nurses' Association has been founded by Her Excellency with the idea of forwarding the interests of Indian nurses in every

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