

CANADIAN NURSES ON INDIAN RESERVES.

Organisation of nursing for the benefit of the community in Canada is taking place in many directions, and one of the most interesting is in connection with the Indians in the reserves in the three prairie provinces of Manitoba, Saskatchewan, and Alberta, where a great change has taken place during the last twenty years. Perhaps this difference, says Miss A. W. Tye, in an interesting article in the *Canadian Nurse*, from which we give the following particulars, is in the changed attitude of Indians towards white doctors and nurses.

It does not, says our contemporary, require a long memory to recall the time when Indians had implicit faith in their Medicine Men, and refused to have white doctors come to see them. Now the pendulum has swung to the other extreme, and Indians ask for the doctor for many minor ailments and under circumstances where white settlers would hesitate to incur such expense.

To meet this changed attitude the Department of Indian Affairs has been active along the following lines:—

- (1) The appointment of medical officers for Indian reserves;
- (2) The establishment of cottage hospitals on some reserves;
- (3) Arrangements made for surgical and special treatments in hospitals of nearby cities;
- (4) The appointment of four travelling nurses for the three prairie provinces.

Miss Tye's article deals principally with the work of the travelling nurses, four of whom, Miss Ethel Johnston, Miss Annie Le Drew, Miss A. I. G. Martineau, and Miss Margaret Ramage were appointed in 1921. The equipment of each nurse consists of a dispatch bag for correspondence, reports, &c., and a suit case which contains a few drugs and dressings, towels and bed clothing for patients. These nurses are under the direct supervision of the Indian Commissioner at Regina, and all reports are made to him and instructions received from him.

It is something new for the Indians to have trained nurses coming into their homes giving advice along sanitary and health lines, actually nursing those who are sick and bathing the wee babies. At first they resented such services, but they soon learned to appreciate them, and often telegraph for a nurse when severe sickness comes upon them. As a result of these periodical visits many of the Indian women have become better housekeepers, and give better care to themselves and their families. The nurses also visit the boarding schools, and thoroughly examine the children, recommending special treatment where necessary. Baby clinics are held, in which the young mothers are greatly interested and learn to give their children better care, so that it is anticipated that as the children grow up they will be much freer from sore eyes and tubercular glands than are the Indian men and women of to-day. The nurses have also rendered admirable service in epidemics of small-pox, measles, scarlet fever and diphtheria.

In the homes, in the schools and in the baby clinics, the

travelling nurses render very valuable services, but there is another phase of their work that has perhaps been even more valuable—it is their work during epidemics on reserves and in schools. Since their appointment there have been several epidemics, such as smallpox, measles, scarlet fever and diphtheria. These nurses have been untiring in their efforts to cope with the epidemics, and often under very trying and inconvenient conditions—such as turning day schools in isolated districts into hospitals, etc. They have also been called upon to nurse several severe cases of pneumonia in the Indian homes on reserves.

One cannot help but realise that for such work special qualifications are required. There must be great physical strength and endurance, patience and sympathy, and ability to make the best of things under circumstances that are frequently trying, and under conditions that are often very poor. It is a work in which there are many discouragements, unless one keeps looking ahead; but the benefits will be seen more and more as time passes.

Last summer during the treaty payments, a baby show and clinic was held, and we reproduce from the *Canadian Nurse* a picture of the prize baby and its proud mother. Eleven babies under one year entered the competition. A large hospital tent was crowded with spectators, white people and Indians. It was amusing to watch the old squaws, in their beads and blankets, gazing with fond pride on their wee grandchildren while their clean, white, dainty clothing was being removed preparatory to the examination, which was made by the doctor for the reserve, and a nurse from the Department of Public Health, Regina. Points given ranged from 87 per cent. to 95 per cent., and had the babies been vaccinated the range would have been 93 per cent. to 100 per cent.

The credit for the holding of this fine baby show and clinic is largely due to the enthusiasm of the Indian Agent's wife, Mrs. Deacon, and the high standing of the babies reflects great credit to the nurse in charge of the cottage hospital on the reserve, Mrs.

Pruden, who had heard the first cries of the babies and had taught the mothers to properly care for them.



AWARDED FIRST PRIZE.
Baby Show, File Hills, Saskatchewan.

SUNLIGHT AND THE SLUMS.

Dr. R. King Brown writes in *Modern Sunlight*:— In designing layouts for slum clearances and fresh sites there are certain hygienic principles which should always be kept in view. In the first place, spaces both at the rear and the front of houses should be wide enough to admit direct sunlight reaching the rooms on the ground floor. In many of our block dwellings, as well as slum dwellings, it is only the top stories which receive direct rays.

Windows of the casement type are best, since they can be completely opened to admit the sunlight, and are easily accessible for cleaning. They should also run up near the ceiling. No staircase, passage, landing or room should be permitted which has not free and direct communication with the open air. No basements or semi-basements should be permitted for any purpose except for coal-cellars or store-rooms. They can never be adequately lighted or ventilated.

[previous page](#)

[next page](#)