

Hygiene seeks to attain the ideal conditions of which we have spoken.

In other words are its means and its mentality adequate? Public Health proceeds from medicine—the Art of Healing—and from sociology—the science which studies the relations between social conditions. One could almost say that Public Health, with medicine as starting-point, tends towards or is pushed towards sociology.

After briefly reviewing the history of Public Health from the Laws of Moses onwards, Professor Roatta shows that at the approach of the nineteenth century we find a complete change in the Public Health field.

Our civilisation is very young.

It is difficult for us to realise that Pasteur—the man who definitely destroyed the theory of spontaneous generation, and by means of bacteriology created a new science, unveiling the mysteries of infectious diseases—only died 34 years ago. Many of us were already born, or even well on in life, when the centuries-old edifice of traditional medicine fell to the ground, and from the ruins of the ancient theories and dogmas arose the solid construction of experimental science.

Discussion.

Miss Venny Snellman, Director of the Nursing Service of General Mannerheim's League of Child Welfare, discussing Dr. Roatta's paper, said that this is a time of great advance in the field of Public Health, and the Nursing Organisations in Finland, as in other countries, are trying to give adequate teaching to student nurses in the matter connected with this great and important part of nursing work, and encouraging them to fit themselves by study, post-graduate and otherwise, to take an intelligent part in the campaign for the prevention of disease and the building up of a healthy race.

Already science has done a very great deal in checking the spread of infectious disease, but this is not enough—we want and hope to see these diseases disappear. It would not appear that the Public Health workers would advance too quickly; nevertheless, the warning of such a possibility should not be ignored.

The Public Health Worker needs to have the right temperament, personality and broad outlook on life: her professional studies should follow a good basic education and the various branches of Public Health must work in close co-operation.

The worker must receive adequate remuneration to enable her to live comfortably, and should be required to contribute to a good Provident Scheme, for, however enthusiastic the health worker, unless conditions are satisfactory, enthusiasm is apt to grow dim.

The activities in connection with Public Health have revolutionised the outlook of the whole nursing world in connection with health and ill-health, and the general public look to the Nursing Profession, and rightly so, to help to resist the deteriorating effects of disease, both of mind and body.

She also asked, "Why is it we see such a difference in health conditions in different countries of the world? Here is a country with a high maternal mortality rate, here is another with a high diphtheria incidence. It is a sign of the youth of the Public Health Movement and our past separation from other countries. More international intercourse, in just such meetings as this Congress, is needed to utilise all the findings of public health workers."

The Red Cross Nursing Programme.

THE LEAGUE OF RED CROSS SOCIETIES.

Mrs. Maynard L. Carter, Chief of the Division of the Nursing League of Red Cross Societies, presented a paper on "The Red Cross Nursing Programme," in which she

gives a brief account of the more recent events which have taken place in the Red Cross nursing world.

Of these, she says the most important is the thirteenth International Red Cross Conference, held at the Hague in 1928, when certain joint recommendations on nursing presented by the League of Red Cross Societies and the International Red Cross Committee were approved and which one may consider as being the basis of the Red Cross Nursing Programme.

The second important event was the meeting of the Board of Governors of the League, held at the Hague at the same time as the thirteenth Conference, when a resolution was passed providing for the appointment of technical advisers to the League in matters relating to its work, including nursing. This resolution provided for the appointment of a group of nurses who would take the place of the Nursing Advisory Board which hitherto had guided the League in its nursing policy.

Mrs. Carter then discussed in some detail the ten recommendations approved by the thirteenth Conference which for the purpose of her paper may, she states, be taken as the basis of the Red Cross Nursing Programme.

THE INTERNATIONAL RED CROSS COMMITTEE.

Mlle. L. Odier, Director of the Visiting Red Cross Nursing Service of Geneva, stated that nursing is one of the subjects to which the International Red Cross Committee is devoting its most urgent attention. This fact, she said, explained the Committee's interest in the Conference, and why it conveyed its sincerest wishes for the complete success of the present meeting of the International Congress of Nurses.

Mlle. Odier stated that if the European War of 1914 to 1918 has abundantly shown the importance of Red Cross nurses, it has also made clear what they still have to learn. For this reason National Red Cross Societies have courageously set to work to improve the training of their ambulance personnel.

The War has also taught us that it is possible to combine the work of trained nurses on behalf of the wounded with that of the Red Cross personnel. Aid detachments have seen that even with the greatest keenness it is impossible to learn the art of nursing in a few lessons.

The final agreement between the International Committee and the League arrived at in 1928 has made possible general co-operation with a view to raising the professional standard of Red Cross personnel. The International Committee will devote itself to training with a view to war and public disaster, while the League busies itself with technical matters arising out of peace activities.

PRIVATE DUTY SECTION.

Miss Nevena Sendova, Director of the Red Cross School of Nursing, Sofia, Bulgaria, presided over the meeting of the Private Duty Section which discussed

THE STATUS AND PROBLEMS OF THE PRIVATE DUTY NURSE.

Asia.

Miss Agnes B. Chan, Superintendent of Nurses at the Wesleyan Hospital, Fatshan Tung, China, said that in China, apart from among a very small part of the people, in a few large towns private nursing, does not exist. It is true that in Canton, Shanghai, Peking and such large cities there are graduate nurses in private practice, either specialising in maternity nursing, or (in fewer cases) undertaking general nursing. These have agreed upon regulations as to the length of working hours and the fees to be charged, but they touch such a small section of the people that they do not materially affect the problem when it is viewed as a national one which concerns the welfare of the people as a whole. Private nursing does not exist for most of the people of China which has scarcely begun to get the conditions—medical, social and educational

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