

THE 1930 FUND.

(FOR THE BENEFIT OF TRAINED DISTRICT NURSES.)

Report for Year ending 30th June, 1933.

During the past year the work of the 1930 Fund for Trained District Nurses has gone steadily forward.

The Committee record with regret the loss by death of one of their members, Sir William Didsbury Sheppard, K.C.I.E. Otherwise the personnel of the Committee remains the same, with Sir Campbell Rhodes, C.B.E., chairman, Sir William Foot-Mitchell, J.P., Hon. Treasurer, and Miss Darbyshire, R.R.C., Chairman of the Ladies' Committee.

There has been no decrease in the claims made upon the Fund, and while the general type of case assisted remains very much the same, it is evident that the strain of the times has told heavily upon those who come within its scope. Breakdown in health tends to occur at an earlier age; provision for the future, adequate a few years ago, is so no longer; Nursing Associations find it more difficult to raise money to help their nurses; amidst widespread unemployment those handicapped by age or weakness have less chance than ever.

During the year the Committee have dealt with 130 enquiries, 80 re-applications, and 94 new cases. At present regular grants are being made to 176 nurses, involving a weekly expenditure of over £92. Twenty-eight new grants have been sanctioned during the year, vacancies having occurred through the deaths or altered circumstances of beneficiaries.

In addition to these weekly allowances, 120 special grants have been made for various purposes.

The Committee have come into closer touch with many of the Nursing Associations, and are glad to report increased co-operation with these and with other Funds for the benefit of nurses. In any case which is not eligible for help from the 1930 Fund efforts are made to direct the applicant to the appropriate channels of assistance. It has throughout been the aim of the Committee to establish personal and friendly links with those helped by the Fund, and as time has strengthened these they have found themselves consulted, and have been able to help, in many ways other than financial. In this direction especially the work has developed greatly during the past year. Advice and help have been given in difficulties of housing, finding work, obtaining suitable medical or hospital treatment; problems of Insurance and Pensions have been taken up and in practically every case satisfactorily solved; friendly visiting has been established; arrangements have been made (at no charge on the Fund) for gifts of library subscriptions, books, magazines, and papers, of clothing, of materials for work, of extras such as fruit or flowers or special nourishment, and for outings of various kinds.

Testimony as to the happiness and relief from anxiety which the assistance from the Fund has meant and heartfelt expressions of gratitude are constantly reaching the Committee, and they appreciate greatly the opportunity afforded by the generosity of the anonymous Donor responsible for the Fund, both of giving monetary help, and of rendering service in other ways.

Summarised Receipts and Payments Account for the Year ending 30th June, 1933.

Receipts.	£	s.	d.
Cash at Bank and in Hand at 1st July, 1932	2,137	0	1
Income from Investments including War Loan bonus	6,352	5	9
Interest on Bank Deposit	40	6	10
Donations	1,010	0	0
	<u>£9,539</u>	<u>12</u>	<u>8</u>

Payments.	£	s.	d.
Benefits Distributed	5,327	14	8
Administration Expenses	560	4	4
Cash at Bank and in Hand at 30th June, 1933	3,651	13	8
	<u>£9,539</u>	<u>12</u>	<u>8</u>

We have compared the above account with the books and vouchers of the Fund and certify that it is correct and in accordance therewith. We have seen certificates of the Official Trustees of Charitable Funds as to the Investments and of the Bankers to the Fund to the Balances with them.

(SGD.) GUNDRY, COLE, BOND, STRAUS & MANNING.

Chartered Accountants.

3, Great Winchester Street,
London, E.C.2.
13th July, 1933.

OSAKA, JAPAN, HAS OWN "HENRY STREET NURSES."

The famous Henry Street nurses of New York may be found looking after the sick in 35 foreign countries, according to Marguerite Wales, R.N., general director. Osaka, Japan, for example, has its Lillian D. Wald in Mrs. Siki Hora. Three years ago this Japanese woman returned to her own city after two years of experience with the Henry Street nurses. She enlisted the financial support and the co-operation of *Osaka Asahi*, the city's largest newspaper, and established a visiting nurse service along the lines of the Henry Street organisation. She has trained a staff of 10 nurses, who go about that city in uniforms almost exactly like those worn in New York by the Henry Street visiting nurses.

THE A.N.A. BULLETIN ASKS: ARE NURSES UNPREPARED IN FIELD OF OBSTETRICS?

More well trained obstetric nurses are needed in the United States. The women's magazines are demanding of the medical profession a lower maternity death rate—that of U.S.A. being one of the highest in the civilised world. That doctors are not expected to shoulder the entire responsibility is made clear in the report on Obstetric Education of the White House Conference. It speaks of nursing's unpreparedness in strong language, as follows:—

"There seems to be no escape from the conclusion that nurses do not know what adequate maternity care is." The White House sub-committee on obstetric teaching blames the schools for the apparent ignorance about maternity care among nurses doing obstetric nursing. Many nurses refuse to take obstetric cases, because they realise their own unpreparedness, the sub-committee says. A service of less than 10 obstetric patients a day does not offer a sufficient volume for teaching obstetric nursing, it contends. Yet 50 per cent. of the hospitals teaching obstetrics offer less than that. Nor are post-graduate courses in many instances more than additional experience courses, the committee finds.

The committee submitted two questions to three groups of nurses. They were: (1) State what you consider constitutes complete care for a mother from the beginning of pregnancy until the baby is six weeks old, and (2) How can maternity mortality be prevented?

Nurses taking post-graduate courses in public health nursing who had recently attended an institute on obstetric nursing gave the best answers. Private duty nurses did better than new graduates. But the committee concluded from the answers given that nurses were not alive to the part they can play in meeting this challenging national problem. It suggests that nurses' associations conduct institutes and refresher courses for all nurses doing obstetric work.

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