THE INTERNATIONAL COUNCIL OF NURSES.

SPECIAL COMMITTEES OF THE I.C.N.

Three Special Committees were appointed at Montreal in 1929 to present Reports in 1933, which they did. These were: The Committee on Mental Nursing and Hygiene, Chairman, Fru Karin Neuman-Rahn, Director of the Preliminary Course of the Municipal School of Nursing, Helsingfors, Hon. Secretary of the Organisation for Mental Hygiene, Finland; the Florence Nightingale Memorial Committee, Chairman, Mrs. Bedford Fenwick, President, National Council of Nurses of Great Britain; and the Committee on Ethical Standards, Chairman, Miss Mary M. Roberts, Editor, American Journal of Nursing.

REPORT ON MENTAL NURSING AND HYGIENE. Presented by Fru Karin Neuman-Rahn.

At the meeting of Board of Directors in Geneva, 1927, it was decided to form a study-committee on mental nursing and hygiene. The greater part of the members were appointed at the convention 1929. The rest have since been nominated by the member-organisations of the I.C.N. The Committee consists at present of 27 active and corresponding members. Mrs. Karin Neuman-Rahn was elected chairman.

The aim of the Committee is to strive for improvements in the psychiatric field of nursing, corresponding to the demands of modern scientific treatment of the mentally diseased in, as well as outside, the mental hospital, i.e., the social and the preventive work.

To further the aim and to improve conditions all countries represented on this Committee were recommended each to form a National Committee in Mental nursing and Hygiene. But such Committees or Associations, as far as we know, exist only in America, England, France, Finland, and Switzerland. They should be of essential value for furthering mental nursing in their own countries.

Three questionnaires have been sent out during this four-year period, and in January 1933—because of possible changes in some of the countries—a summarising circular letter was also sent out. Collecting materials was difficult, and often hampered, because of much over work and poor interest in some parts of the world. Until now only half of the questionnaires have been returned.

Realising that educational work in this field is not adequately developed, nor is it carried out under very favourable conditions, the Committee considered it necessary to take up the educational aspect of the question, as the principal item on the programme.

From the questionnaires returned, we have obtained certain pictures of the work, as well as some suggestions, sent in by the more advanced countries.

The summary of the findings are briefly as follows:
America and Canada are working, generally speaking, on the same lines. Many state and some private hospitals have their own training-school with a two or three years' curriculum, and the tendencies are towards affiliation between the mental and the general hospitals. In some places this has been already accomplished, but the nursing and training is generally poor, the standard of the staff and students being less good than in general nursing schools as America states.

England, Scotland and the Irish Free State have a three years' training in mental hospitals, the first year of which finishes with the same examination as do the other branches of nursing. The standard of the staff, as well as the conditions, seems to be good.

Holland reports that they give a three years' training which in some places includes also training in general nursing. The nursing and living conditions in the hospitals are stated to be good.

In the best training centres of all three countries most of the responsible posts are held by female nurses, trained in general nursing. Sister tutors are sometimes employed. But mental nursing and hygiene is not compulsory in the basic course of the general nursing, but this is the aim. Graduates in general nursing can specialise in these countries through post-graduate training.

Of the Latin countries only France has answered the questionnaire. France comes most in line with Switzerland. In both countries the basic course of the general training includes some theory, but only in one general nursing school is any practical instruction given. In France the subject is being studied in the Ministry of Health. The staff of mental hospitals have received two or three years' training, but without any instruction in general nursing. The educational standard of this staff is low and the working and living conditions are poor, i.e., in Switzerland in some hospitals certain members of the staff have to sleep in the wards, no rooms being provided. But the fully trained nurses, few in number, fight for improvements and against the backward Trade Union.

China, Philippines, India, South Africa and quite especially New Zealand, have had a good start, since it was the fully trained general nurses who took up psychiatric nursing.

Denmark, Finland, Norway and Sweden are working on the same lines. They have graduate female nurses, trained in general nursing in all responsible posts, with some exceptions in Denmark and Norway. Mental nursing in the basic course is the ideal in Sweden, and most of the students get it already. In Finland it is a compulsory subject. Before employment as head nurses nearly all graduates practically get their specialisation through one half to one year's post-graduate training as assistant head nurses.

Refresher and post-graduate courses are given in Sweden and Finland. The male and female subordinate staff get a one or two years' training in state-schools for mental nursing which are affiliated to general hospitals, but they get no employment in Sweden before 24 years of age. In these northern countries the male staff is more and more disappearing. The Nurses' Association in Norway has provided office space and nurses for the social mental work done.

Germany has a special one year's course for mental nursing for graduates in Kiel, who have already had their general training. For non-graduates there is a two years' mental training course which includes one year general training. The state hospitals train their own staff, but it is not the best type in general. Many hospitals, with medical schools, employ fully trained female nurses. Living and working conditions are not up to date.

In conclusion I should like to state that where fully trained nurses of high education are in charge of the hospitals and the wards, the standard of nursing as well as living and working conditions seem to be more satisfactory.

Greece reports that special psychiatric nurses do not exist.

Bulgaria reports that some theory is included in the basic curriculum.

No answer has been received from: Belgium, Iceland, Japan, Latvia, Poland and Tscheckoslovakia. Yugoslavia has withdrawn its member as no work is being done in that country.

The recommendations for a working programme may nevertheless be given even if they have to be discussed in our Committee. They are:

- 1. Training in mental nursing to be compulsory in the basic course of general nursing;
- 2. Female nurses, fully trained and with special prepara-

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