

THE OSLO MEAL.

The Journal of the Western Australian Nurses, brings to their notice the value of the "Oslo Meal" as a means of making better citizens. To quote:—

"As the Oslo Meal is now being widely adopted throughout Australia, it is of interest to recall the genesis of the idea and to state the results of recent experience.

"In launching the programme for the making of better citizens among children in the crowded industrial suburbs of Melbourne, a group of helpers, headed by Dr. and Mrs. Ramsay Mailer, commenced a chain of Opportunity Clubs where girls and boys could have cultural and other facilities for the development of body, mind and spirit.

"Noting the success of a simple, balanced and inexpensive meal, adopted under somewhat similar circumstances at Oslo, Norway, the principles were adopted here with surprisingly good results. Many children were found to be suffering from malnutrition and although the circumstances were such that the Opportunity Clubs could only provide one meal per day—lunch for schoolchildren—the results were that the children receiving the lunch put on weight, bright cheeks took the place of sallow skins and their capacity for learning and co-operative action was wonderfully increased. Briefly, the Oslo Lunch as now supplied is as follows:—Three slices of wholemeal bread (this must be wholemeal and not a coloured imitation), a spread of butter and cheese or salad vegetables, a glass of milk, followed by an apple.

"A variation including the sprinkling of wheat hearts (to supplement the vitamin B1 content) had good results. Other fruits are added as opportunity offers—oranges, pineapples, bananas, etc., also lettuce, celery or raw carrot.

"The eating of an apple at the close of the meal adds vitamins and mineral salts, aids digestion in the chewing process and assists to cleanse the mouth and to clean the teeth.

"Opportunity Clubs are developing towards community centres in both residential and industrial suburbs. Many aspects of our community life are being gathered around these centres, including kindergartens, Boy Scout and Girl Guide troops, sporting clubs, trade classes, libraries and facilities for the development of musical and dramatic talent.

"The secretary of the movement is Mr. R. A. Gardner, 60, Market Street, Melbourne, who would be glad to furnish any additional information."

AN OPPORTUNITY FOR TRAINED NURSES.

By LILLIAN YOUNG, S.R.N.

Having just completed a Mental Course at one of the well-known Mental Hospitals it may prove of interest to other nurses to know something of the possibilities and opportunities to be found latent in the precincts of these places which are isolated communities, both professionally and geographically.

Owing to the extent of this specialised service the contention of the psychiatrist to-day seems to be that Mental Nursing should be regarded as complementary rather than supplementary to general nursing.

But as a trained nurse, having worked in and under the present existing conditions, I would strongly recom-

mend all those seeking a knowledge of the workings of the mind, normal and otherwise, as well as an insight into a profoundly interesting study of mental and nervous disorders to avail themselves of this opportunity, put away fears of barred doors, prison-like clanging of key—a practice of the years.

Special help can now be found for trained nurses and interesting experience obtained who will work for the three months in the hospital with doctors on Insulin and Electro Convulsion Therapy and for three months in the acute ward to study all the most severe forms of insanities and nervous disorders. Trained nurses are not expected to do any domestic work during their term of residence and are free to leave at the end of six months (complete with Mental Certificate). The valuable lectures and the knowledge acquired from one's own observation and study has outweighed the disadvantages. Then, too, the insulin treatment for early Schizophrenia producing deep states of hypoglycæmia coma is most interesting, and all patients present a variety of different phenomena.

Electro-Convulsion Therapy has taken the place of Cardiozol at some hospitals and produces grand mal fits.

Electro-Convulsion Therapy is considered to have less likelihood of psychological wound, the patient remembers nothing of the treatment, but is apprehensive of Cardiozol.

The reactions are the same in both treatments—grand mal and petit mal fits.

Further information can easily be obtained by any nurse interested.

If this article stimulates an interest in a few it will have served well. "Stimulate, not stifle" is a motto we can do well to follow, realising that it is the ability of the mass to think and reason that sets the pace of progress.—*Reprinted from "Una."*

KING EDWARD'S HOSPITAL FUND FOR LONDON.

Considerations on Standards of Staffing.

In 1943, the King's Fund published recommendations on two subjects for consideration by hospitals: Hospital diet; and the Supervision of Nurses' health. The readiness with which the recommendations were received, and the interest shown in the two memoranda containing them, indicated a widespread recognition of the importance of the two subjects, as factors in the efficiency of the hospital services. The same process of considering evidence from many sources, and of comparing practice, has been at work in connection with another subject of importance to the efficiency and the prestige of the hospitals, the number and type of Nursing staff required in relation to the number of patients and certain other factors, and the amount of work to be expected of each nurse. In this case, much evidence came from the general public, and as a matter of common knowledge and experience. In particular, the Fund's work for Nursing Recruitment brought the subject into prominence. The subject was referred to a sub-Committee on Nursing Staff, and its conclusions are now available in pamphlet form, a copy of which we have just received, and to which we hope to allude in our next issue, as it contains information of a very valuable character.

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