

many for institutional work. There are 50 medical districts to-day and about one-half of the districts have a population of 1,000 to 2,000. Outside of Reykjavik and few of the larger towns the district doctors are, almost without exception, the only doctors, each in his district. The country is again divided into 200 districts, one qualified midwife being appointed for each district. The midwives are not dependent on midwifery as their principal occupation as, in the sparsely populated districts, births are very few. The midwives are most frequently in charge of the vaccination against smallpox, each in her own district. There are 150 active doctors in the whole of the country, and there are 80 in Reykjavik alone. So there is no lack of doctors in Iceland. The medical faculty of the University has always had more students than any other faculty and the attendance is still increasing, so instead of the former general fear of shortage of doctors some fear that an overproduction is imminent.

The most remarkable achievement in preventive medical care in the country since the beginning of the century, has been attained in combatting and preventing tuberculosis. Since 1903 laws have been in force concerning prevention of tuberculosis and detailed Prevention of Tuberculosis Act since 1921, last amended 1940. Up to 1930 tuberculosis was a very prevalent disease in Iceland. From 1925-1930 the death rate from tuberculosis was terrifically high or 21.7 per 10,000 inhabitants, but in 1945 the death rate had dropped to 6.8 per 10,000, and is still on the down-grade, so the death rate from tuberculosis is now among the lowest in Europe. Measures are now being taken to examine the whole population for tuberculosis with the most up-to-date scientific methods. In reaching this goal specially trained nurses are contributing to a very fair extent. The development of infant welfare care has also brought striking results, which gives evidence of the greatly improved health conditions of the people. The child death rate has decreased to 30-45 per 1,000 of the population. The lowest ever recorded was in 1938 of 29 per 1,000. Some years show a little higher figure specially when non-epidemic child epidemics have occurred.

There are many things that will have significant bearing on what the future position of the nurse will be in each country. The country's past history, traditions, geographical situation, the nation's intellectual standards and, not the least, economic conditions. These are so vastly different the world over. Although the highly organised international co-operation of nurses has done much to elevate the standard of nursing, there are ideas in nursing education that are comparatively unaccepted in some countries, and others that have been recognised and put into practice for years in other countries, as, for instance, the independent Univers-

ity School of Nursing in America. In countries where the nursing profession is very young, as in Iceland, we have been mostly concerned with curative nursing and educating the nurses to be as good bedside nurses as possible, as our work has been, up to such a short time ago, confined to the care of the hospitalised sick. However, in the years that preceded the Second World War, we were becoming acquainted with preventive medicine and public health. The fact that the nurse will play a very important part in any future scheme of preventive medical care is being realised better than ever by the doctors and the lay-public. The doctors fully realise that they would be seriously handicapped in their work if they were not assisted by well qualified nurses. The nurses themselves have opened their eyes to the fact that their position will be very different in the years to come, and that it will be necessary to revise the nursing school curriculum, if they are to enter the broader field of community health services. But it is doubtful whether this revision and preparation of the future nurse in the best possible way can be done while the strained economic

situation, as at present, exists. The integration of preventive care with curative nursing seems to be inevitable in any teaching programme, and the students prepared for their future work on a much wider basis. The contact the students have with the patients has been mostly limited to the hospital and therefore the students are apt to think little of the patients as members of the community. But were they to gain more knowledge of the social background of their patients and of what are the pre-disposing causes of ill-health, they would appreciate the importance of good health more and feel that health teaching should start in the hospital. Personally I feel that the experience we gain by taking part



Photo: Keystone.

"TO WALK MY POST IN A MILITARY MANNER."

Obeying that part of his general orders which instruct the sentry to walk his post in a military manner, this Marine Corps sentry paces his beat, in spite of the cold of Arctic Iceland, where he is stationed.

in the preventive work in the public health field teaches us that the future nurse must be prepared to be much more of a *health teacher* than she has been up to now, if she is to work to promote health and prevent disease, which surely is the ultimate aim of both the nurse and the doctor.

Doctor Höjer asks if the time has not come to give the nurse a training more in line with that of the doctor. Has not the education of the nurse been in the line with that of the doctor all along? Has it not changed and grown as medical science has developed? Has the nurse not been the helper and the co-worker of the doctor from the time she appeared? She could not have gained the position she holds to-day, if she had not been educated to assist the doctor first and foremost in his diagnoses of disease and with the treatments of the patients. With the still greater advance of medical science and wider practice of the doctors in preventive medicine and public health the future nurse will also advance and keep on playing an effective part in any future scheme, as she has done in the past.

[previous page](#)

[next page](#)