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FOREIGN DEPARTMENT

IN CHARGE OF

LAVINIA L. DOCK



ORGANIZATION NOTES

THE REGISTRATION MOVEMENT IN ENGLAND

THE movement towards State registration in England is now advancing with considerable firmness, owing to the unceasing energy of Mrs. Bedford Fenwick, Miss Stewart, Miss Mollett, Miss Brea, and others whose names are familiar, and to the support of seven hundred-odd members of the nursing profession they have rallied around them. The first annual meeting of their Society for State Registration took place on May 8 and was a notable occasion. Miss Louisa Stevenson presided. The secretary's report showed a great amount of work done in propaganda and gratifying results in public interest. After the regular business the first resolution was proposed by Miss Rogers, matron of the Leicester Infirmary. It was:

"That in the opinion of this meeting the legal registration of trained nurses by act of Parliament is a matter of urgent national importance and that it is desirable to introduce a bill with this object into the House of Commons."

The resolution was carried unanimously.

The next resolution was:

"That the Executive Committee be authorized to instruct counsel to draft a bill for discussion providing for the State registration of nurses, and that such draft bill be, after approval by the members of the Society for the State Registration of Trained Nurses, submitted to hospital committees, medical and nursing bodies and political societies, and that their consideration of its clauses be invited."

The resolution having been carried unanimously, Mrs. Bedford Fenwick proposed "that a Parliamentary Bills Committee be appointed, upon the nomination of the Executive Committee, to deal with the matter," and said that while nurses must themselves have seats on this committee, it was important to obtain the coöperation of members of Parliament and of women who understood political business.

Miss Isla Stewart in seconding the resolution said: "Do we realize what we have done to-day? Looking back over the last sixteen years' work in the cause of registration, it seems to me that it has all been in preparation for our act of this afternoon."

The resolution was carried unanimously.

Miss Stewart then said she rose once more, at the request of the president, to propose a vote of thanks to the honorary secretary—who was the right person to thank in connection with the registration movement—for her work during the past year. For sixteen years she and Mrs. Fenwick had been working together at this question, and she thought she would have given up long ago if it had not been for Mrs. Fenwick. Her steady work had told, and when

registration was an accomplished fact it would be Mrs. Fenwick to whom the thanks of the nurses of Great Britain would be chiefly due. No one, concluded Miss Stewart, knew so well as herself, and perhaps Miss Breay, what this work had meant, and how much it had taken out of her.

In acknowledging the vote of thanks, which was carried by acclamation, Mrs. Fenwick said she felt it was rather premature. She reminded the meeting that they must not go away satisfied. While the registration movement had emanated from this country, others had got to the goal before us. She wished we had kept the lead, but, at any rate, let those present determine never to cease their efforts until they are self-respecting women with legal status.

In connection with the stirring account in the *British Journal of Nursing* of this meeting it is really very funny to read the account of the meeting of the Royal British Nurses' Association at about the same time. No one seems to have had anything to say except a Mr. Fardon, a medical man, who for some reason quite unfathomable to American nurses and, we may add, to American physicians, is one of the members of the R. B. N. A. Few American nurses are familiar with English nursing history; we therefore explain that the R. B. N. A. was organized some years ago for the express purpose of securing registration, but it so fell out that a group of people, mostly medical men, got into their own hands the entire control of the society and deliberately repudiated the principle of registration, for which it had been organized. They then managed to freeze out and squeeze out all who resented or criticised their doings, and from that day to this no one in the R. B. N. A. has mentioned registration. The nurses who belong do not seem to consider it good manners to mention anything. Reports are read by honorable medical secretaries, and responses are made by Mr. Fardon. We cannot imagine why any nurses go to these meetings, which must be very dull. However, at this last one Mr. Fardon rose and spoke as follows:

"Before the meeting closes I should like to mention I have been requested by Nurse James to say that she would like to bring before the annual meeting the question of the State registration of nurses. I think myself the time has come when it is just as well that those members who are interested in the subject should have an opportunity of saying what they feel in this matter (!). There is no doubt that before the twelve months are over the question will be brought forward in some way, and I think it is a subject on which the association will be expected to state its views. I think what it may say will have a wide bearing outside the association itself; and I have been requested by Miss James to state that she and several members feel strongly it is a matter which ought to be discussed, and she would like to bring it before the annual meeting."

We should say that the Society for the State Registration of Nurses had scored its most brilliant success in thus moving the R. B. N. A. Mr. Fardon could probably not be led or driven, but he has now been, as it were, "siphoned" along the inevitable road.

A succinct and very clear account of the history of the R. B. N. A. in this respect will be found in the *British Journal of Nursing* for May 2, 1903.

NOTES ON SOME PARIS HOSPITALS

MISS MARY BURR, a member of the St. John's House League of Nurses, and whose articles make one feel somehow as if she were an old friend, has been writing some very interesting accounts of the Paris hospitals to the *British Journal of Nursing*, from which we take this:

"HÔTEL DIEU.

"Our final visit was paid to the Hôtel Dieu. So far wherever I had been there were distinct signs of awakening, even progression. But I did want to see the bad conditions that I knew existed, and without any amelioration, and my wish was granted.

"It is almost impossible to describe the conditions under which the sick poor struggle back to existence, or die, in this splendid building; for under proper management what grand work for suffering humanity might be done in it. We were shown first a female surgical ward. It was for that ward operating *and* visiting day. What a combination in these days of advanced surgery, when the patient's friends must pass the door of the operating-room, and the door is not always kept shut, when the surgeons stand in their holland overalls spattered with blood just inside the ward door, so that everyone must pass them who enters or leaves the ward!

"This is what we saw: A long ward of many beds close together; a young woman, evidently the next to go under the surgeon's knife, was having a much-soiled sheet taken from beneath her by the sister (religious), dressed in the usual black stuff dress of her order. No effort was made to hide this article, and, merely gathered together, it was carried the length of the ward, past the group at the door, and outside. Here some friends of a patient were met, and the dirty sheet was still held up to the public gaze during the whole of the conversation. In the meantime an infirmier, or porter, had placed a blanket lightly round the patient and carried her out of the ward, past surgeons, sister, and visitors, to the operating-room, with her very soiled linen hanging down behind her.

"Perhaps sterilization is only used here for major operations; certainly nothing had been done to prepare this patient, not even a change of linen, and her condition had better be imagined than described.

"We next saw a male surgical ward, much more crowded with beds and patients than the female ward; not only were they close together all round the ward, but several were placed across the middle as well. Here we spoke to the sister, and I asked how many infirmiers she had under her, and she said 'Two.' That seems to be the proper staff, two for a ward. The number of beds is a detail; there may be twenty or forty, but the attendants are the same in number.

"Then we passed through a male medical ward and many small wards. Here we saw no attendants at all. In these wards also it was visiting day, and the patients' friends were endeavoring to do their little best or worst for the patients, no supervision being exercised, and I thought of the days when I used to mount guard and watch the friends for smuggled dainties.

"Utensils, used and unused, were standing by the bedsides uncovered, making the foul air still fouler, ventilation apparently being an unknown quantity.

"On we went to the large theatre, evidently lately improved, and were shown the huge sterilizers for clothes, as well as the smaller ones for instruments.

"Here were two attendants, one in charge of the sterilizing-room, the other cleaning the theatre floor. They were very curious to know about the hours and pay in England. There is evidently a feeling of discontent among them with their long hours and condition generally.

"'Come,' said our guide in a tone of disgust, 'and I will show you where we eat.' Forthwith we were taken through a subway into a long, light cellar. 'This is where we have our meals.' Again the sanded stone floor, etc. 'Do you have no table-cloths?' I asked. 'Not here, but they do in some hospitals.' 'Who

is responsible for these things?' 'The director.' We saw the kitchen, which might have been cleaner, and then followed complaints of the food, which, I must confess, had a very familiar ring in my ears. 'The food itself is good enough, but it's so badly cooked and served.' We were told that the president was coming on the morrow, and the whole place was being cleaned up to do him honor. Not before it is needed, we mentally added. I cannot describe the sickening feeling of disgust with which we left the Hôtel Dieu. Could it be possible for such things to exist in a so-called civilized country at the beginning of the twentieth century, or were we out of our reckoning, and was it only the beginning of the nineteenth? Could medicine and surgery progress whilst nursing—the handmaid—was neglected? No! Emphatically, no!

"There can be no true progress when only one part develops. The strongest chain is only as strong as its weakest link, and of what use is it to spend large sums of money on improving theatres, in erecting costly sterilizers, when those who have the after-care of the patients seem to know nothing and care less about those whose lives are in their hands.

"If any nurse would like to see conditions similar to those under which I imagine the pioneers of the trained nurse in England worked, I should advise a visit to the hospitals of Paris. We are told comparisons are odious; but no matter how odious they may be, I am quite convinced that it is impossible for a nurse to visit a hospital without making these so-called odious comparisons. Therefore I plead guilty, and confess I visit all hospitals with that object. But one cannot compare the non-existent with that existing, and there is as yet no trained nursing in the Paris hospitals.

"In regard to the buildings I have little to say. The old ones should, for the most part, be pulled down, which will be done, I believe, in the near future. The new ones would have been much more convenient and comfortable to live in if the women who are to live and work in them had a voice in the arrangements. (This applies just as much to our own buildings in England as here.) For is it not the height of stupidity to put all linen and medicine cupboards in one part of a hospital, entirely regardless of the position and distance of the wards, where these things are so constantly needed?

"Nursing, I have already said, does not exist; but since Dr. Anna Hamilton dealt so ably and thoroughly with this subject in her paper, which appeared a year or so ago, the first streak of the coming day of reform has certainly appeared.

"Until then no one had apparently even attempted to rouse the dormant conscience of the authorities in regard to the care of the sick poor. Now, however, there has already been an attempt made at improvement, inasmuch as instruction of a sort is given to some of those who attend the sick.

"If I may presume to prophesy, this attempt is doomed to failure, and for these reasons: First, there is no trained matron as the head of the nursing department, or, for that matter, there are no heads of any departments. The director (a man) seems to be an autocrat in his institution, and controls, arranges, and receives reports, not only from the men under him, but the women also. To me it appeared very absurd to see several surveillantes waiting to give their reports to the director.

"Women to report on women to a lay man! No matter how sympathetic that man may be, he could not possibly understand a woman's work from a woman's point of view, as one of the same sex could who had passed through the wards herself.

“Then, too, the question of sex must and does assert itself, and unless the director has a very high ideal of honor, promotion, etc., does not always mean the capability of the person promoted, but rather the susceptibility of the chief; therefore men-matrons are from every point of view inadmissible.

“Before any lasting reform can be made there must be a nurse-in-chief at the head of the nursing department of each hospital, who must have sole charge of, and be responsible for, the nursing staff. Then there must be a larger number of nurses allowed for each ward, according to the number of beds. There must be more distinction in grades, which would necessarily mean a more definite curriculum and thorough instruction. Under existing circumstances, so far as I understand them, those who enter a hospital may or may not receive the instruction which ends in examination; they are not passed on from ward to ward to receive the varied experience and instruction which goes to the training of a nurse; but they may and do stay in the same ward for years, and are promoted by length of service and not for ability. Therefore they become specialists without the good foundation of general training.

“As a result, too, of men attempting to control an entirely feminine occupation there is a want of discipline shown everywhere in the slipshod, untidy, and careless demeanor of the staff.

“The fact of wearing the black silk cap of a surveillante does not mean added respect, but rather that the wearer is more in luck's way than the others. True, there is an added responsibility, as she has charge of linen and medicine cupboards, but when those in authority make no difference between those in charge and the rank and file, is it to be expected that subordinates will render the respect due to the position of those above them?—more especially when these appear to have no higher standard of work or behavior than the rawest recruit. Then, again, the title *infirmier* or *infirmière* is by no means distinctive; the woman who cooks is called *infirmière*, as well as the one who looks after the sick. The man in the office or who cleans windows is an *infirmier*, as is also the male attendant in the wards. The title merely means a male or female employé in a hospital. To raise the standard not only of the individual but of the worker there must be a differentiation in the titles of the workers, and the same title should not be given to those employed in two such different occupations as cooking and nursing.

“Then there must also be classification; the nurses should have their own dining- and sitting-rooms, and the domestic staff theirs, not because one person is different from the other, but rather to preserve order and discipline; for all honest labor is honorable and should be respected. A housemaid is not less worthy of respect than a nurse, providing they both do their duty honestly and faithfully. We so often forget that Our Saviour was only a poor carpenter, not a doctor or lawyer, or anything of that kind, but a workingman; it is the individual, not the occupation, we should consider.

“The conditions under which the nurses work must be altered; better accommodation everywhere, meals cooked and served in a decent manner, shorter hours.

“The pay at present is from thirty to sixty francs a month, or in English money fourteen pounds eight shillings sixpence to twenty-eight pounds sixteen shillings (from seventy to one hundred and forty dollars) per annum, which, considering the long hours, from twelve to fourteen a day, is not extravagant. I was told by one *infirmier* that he had received an increase of only twenty francs in ten years, and sixty francs is the maximum, even after thirty or forty years' service.

"Of course, under different conditions the salaries would of necessity be rearranged; and if thorough reform is made, and good conditions under which to work with a proper nursing education be offered, undoubtedly a better class of workers will offer themselves, who would be willing to give their time or even to pay for their training. The difficulty just now is to induce a better class to take up this work.

"French ladies, like others we know of, seem quite willing to sacrifice themselves upon the altar of humanity when the whole country acts as audience, for there are many who belong to the Red Cross Society, and who expect to assist in times of war or public calamity, but at present nursing the sick poor in hospital, with only the blessings of those helped as their reward, does not appeal to their hearts.

"When the authorities do grasp the fact of the necessity of trained matrons, then nursing in France will, I think, progress with giant strides. All hospitals in Paris being under municipal control, there will be undoubtedly a uniform curriculum, examination, and certification, with, no doubt, in the near future, State registration, and unless we British nurses look well to it and put our shoulders to the wheel we shall have the mortification of seeing French trained nurses (who at present do not exist) leaving us behind in regard to organization, as our American sisters have already done, for French women are excellent business women and organizers when once they do put their hands to the plough.

"English nurses, will you allow this also?"

"MARY BURR."

ITEMS

INTERESTING little items often appear relating to the different English nurses who came to the congress, showing that they are perennial workers. *Nursing Notes* says:

"On Friday, April 24, Miss C. J. Wood gave her promised lecture on 'Finance,' which proved in her hands by no means the dry subject it is commonly supposed to be. A very clear explanation of what money is and what can be done with it, the meaning of certain 'money market' terms, and some sound advice to nurses on the management of their funds gave everyone present something to remember and ponder upon, and the audience found the subject so interesting that a request was made for further information on business matters in the near future in the form of a series of lectures or classes. Miss Wood spoke of the urgent need for nurses to make provision for old age and sickness, urging upon them that though 'saving' might be dull work, it was better than the fate which too often befalls those who are content to live from hand to mouth, leaving the future to take care of itself."

THE *Journal of the Royal South Hants Nurses' League* is very attractive. "Matron's" touch is felt in it. Do we not recognize her in this bit?

"We regret to have to sternly reject all poetical contributions to the *Journal*. Talented as these compositions sometimes are, we tremble to create a precedent which would tax our space and our printer's bill."

