

The Relationship between the International Council of Nurses and National Nurses Associations

Extracts from the Address to the National Council of Nurses of Great Britain

By

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Before speaking to you about the relationship which should exist between the International Council of Nurses and the National Council of Nurses, and indeed between the I.C.N. and all its National Member Associations, I must tell you quite briefly something of our history, our objectives and our activities. The International Council of Nurses can proudly boast that it is the oldest international association for professional women and was founded in 1899 at the end of a century in which professional work and professional organisations for women was practically unknown. It was founded by a British nurse, Mrs. Bedford Fenwick, who was at one time Matron of St. Bartholomew's Hospital, London.

Mrs. Bedford Fenwick was a great pioneer in the development of professional organisations, and having formed a provisional committee which brought the I. C. N. as we know it into being, membership was then offered to National Associations of Nurses which could show that they were self-governing, non-political and non-sectarian (that is to say embracing all religious faiths). The National Council of Nurses of Great Britain was the first National Association to become affiliated and joined the I. C. N. in 1904. There are now 30 National Associations which are in full active membership; 18 others have National Associate status (that is to say they have not as yet achieved full membership but are working towards it) and in addition, there are several other countries which are interested, are building up their pro-

fessional work and are writing to the I. C. N. for advice and guidance. Our objectives are set out clearly in the Preamble to our Constitution which runs as follows:—

We, Nurses, representing various nations of the world sincerely believing that the profession of nursing will be advanced by greater unity of thought, sympathy, and purpose, do hereby unite in a federation of national associations of nurses. Such national associations shall be non-political, and non-sectarian in character and shall work together, for the purpose of promoting the health of nations, improving the nursing care of the sick, advancing the professional and economic welfare of nurses and enhancing the honour of the nursing profession.

The I. C. N. was therefore intended to be and still is a Federation of friendship between the nurses of the world. It was intended to unite them in a common purpose—no lesser purpose than the health of nations. The I. C. N. has always striven and continues to strive, to help to maintain the highest standards of nursing service in those countries which are in membership and to assist those countries not yet in membership to achieve these standards.

These are objectives—what are our activities? They are many and varied, and I can mention only a few. In the first place we are an Information Bureau on Nursing, responsible for collecting information about nursing from all parts of the world and for giving out such information again throughout the world as and where required, and this can only be done efficiently if we maintain the closest collaboration with our National

Member Associations. We need their help in sending us up-to-date material about nursing activities and nursing developments in their countries. This we can use for countries which are possibly in an earlier stage of development. This first activity reveals itself in our morning mail, which is a daily challenge. We never know from what countries it will come, nor what problems it will pose. We do not always know the answers, but we know we must find out the answers, otherwise we let down the I. C. N. and the nursing profession. Secondly, and this is a very important and highly responsible activity, we endeavour to establish and maintain our relationships with other international organisations working in the fields of health. We are responsible for representing nurses at the international level on other international bodies and in this connection we have to select most carefully. It is essential that we do not lose any opportunity for representing nurses where representation is of value and where nurses have something vital to contribute. At the same time we must not dissipate our energies nor our finances on too frequent attendance at international meetings, enjoyable and stimulating though these may be. We are in official relationship with the World Health Organisation and used as consultants by that body on matters in which nurses are concerned. We are in membership with the World Federation for Mental Health so that we can confer together at the international level with psychiatrists, social workers, psychiatric social workers and others in the field of mental health which is, after all an important branch of public health nursing.

We are in membership with the International Hospital Federation; we are on the Consultative Register of the Economic and Social Council; we are regularly invited to appoint a nurse representative to attend the Congresses of the World Medical Association. In all these organisations

and others we must watch developments, study the agenda of meetings and be ready to enter into discussion or to provide information wherever this seems appropriate to the interests of our own profession and of those whom our profession serves.

A third activity is one with which the I. C. N. is greatly privileged to be connected. As you all probably know, after the conclusion of the last war, there were many thousands of nurses in camps in various parts of Europe. A Screening Board was set up by UNRRA and later taken over by the International Refugee Organisation which set to work to establish the credentials of these nurses who had probably fled from their own countries without having any evidence of professional status. Their names were then entered on a professional register which, since IRO was dissolved, has been handed over to the International Council of Nurses to maintain. This also gives us the opportunity and the privilege to help in solving the many human and professional problems of these nurses who, through no fault of their own, are denied the security of home and country. Many of them are here without friends and families, and there is a unique opportunity for you all to assist and befriend these nurses wherever you may find them.

Yet another of our activities is probably familiar to many of you, particularly if you were able to attend the ICN 50th Anniversary Conference which took place in Stockholm in 1949, for the sponsoring of Quadrennial Congress is an activity which has been carried by the ICN throughout its history. It is the ICN's responsibility to provide for all its member countries equal opportunities for the interchange of ideas.

Finally a word about our essential relationships. A famous General once said: "A collection of soldiers is no more an army than a collection of bricks is a house". I believe this same metaphor can be applied to the

nursing profession and to the International Council and its relationships. For the ICN is not the Headquarters, although we try there to interpret the wishes of our members, answer their questions and solve their problems. It is not the Officers, however much we may depend on them for their judgment and their leadership. It is not just the 350,000 members in 30 countries which are affiliated to us, nor is it just the 30 National Associations of which the National Council of Nurses was the first established. But the Headquarters, the Officers, the National Associations and their individual members, together make up the structure of our International Council. You are the bricks and the corner-stones and the success and progress of the whole organisation depends on the relationship we build up between us and the way in which we serve and support each other. Indeed this relationship, if it is to remain a living one, must be a two way process, between our Headquarters and our member-Associations with each other. Thus can this federation of friendship be a real power for good in the world, not only in the maintenance of health but also in our striving towards peace. There is a saying of Florence Nightingale which has always intrigued me because it is not quite clear what she meant. She said: "The first and most constant duty of a nurse is to do her patients no harm". This may seem a somewhat negative attitude, but if Miss Nightingale meant that the alternative to doing harm was to be doing for our patients, the greatest amount of good,

then I have always maintained that this can be done in more ways than one; not only by being a good nurse, not only by being a good matron or sister tutor, not only by being a clever secretary of a league or association, not only by just being a good person, but by doing exactly what you have all come together to do — that is, to meet each other to discuss your interests and problems, so that you can return to your own work and spread what you have learnt more widely; for, as Miss Nightingale also said: "Professions like nations can only flourish through an individual sense of corporate responsibility". We can none of us afford to be isolationists in a world which is closing in on us and becoming narrower every day. The rapidity of modern travel and the development of modern methods of communication have brought about this trend and we do well to recognise it. Our deeds and, in fact, our misdeeds are known in other countries almost before we have perpetrated them. We cannot therefore be insular; we must be prepared to share our interests as well as our problems with the nurses of other countries as they on their part must be prepared to share theirs with us, and it is our professional machinery or, in other words, our national and international relationships, which we either make for ourselves or which are made for us, which provide the way to enable us to do this better.

In the words of Miss Nightingale "It is the individual who makes an Association and what an Association is depends on each of its members".

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