that many, who have taken it up temporarily, will feel so drawn to it that they will wish to carry on and make good.

The comparison between the salary of a nurse and a teacher has been drawn, but what people do not always realise is that the nurse always gets her board and lodging and uniform or its equivalent apart from her salary. I do not mean that the pay of a nurse is anything like it ought to be, but we hope that will be one of the things which will be put on a sound footing when things become normal again.

As regards sharing the same Mess, I think that each Hospital would have to decide that for themselves. It would not apply here, for the nurses would be so embarrassed that they wouldn't eat while we were there, not at all from a sense of inferiority but simply that they would prefer to eat alone The same thing applies to the English Hospitals at home, It might also make it more difficult in matters of discipline,

I realise that there are many Matrons in India who may think differently, but I am speaking of the more simple people as I find them and they do turn out good nurses, and many of them at this present time are scattered all over India and Ceylon

Nursing and its Future

By Sir Mangaldas Mehta

FROM "THE TIMES OF INDIA"

Nursing is one of the few professions in India where the demand is much greater than the supply. The population of the province of Bombay is over three crores, while the number of nurses, who are registered by the Bombay Nursing Council, is less than 2,000 ; but in England where the area is less than that of the Bombay Presidency, there are 1,20,000 nurses. The seriousness of the question will be further realised when we find that in the whole ot India there are not as many registered nurses as in the city of London. We have in Bombay one nurse to every 15,000 persons, while if we have one nurse to every 4,000 persons, it will still not be the optimum number. From the figures collected it is observed that we have one nurse for about 225 miles and one nurse to about 60,000 of the population.

These statistics tell their own tale about the paucity of registered nurses in this province but so far as persons possessing higher general education to fill in more responsible administrative and teaching posts in a hospital and a training school the position is much worse ; of the 25 training schools for nurses, in the province, only 2 or 3 have sister tutors. Consequently many of the trained nurses are merely good bedside nurses. For holding the posts of sister tutors, we want highly educated and intelligent women with a real sense of responsibility. If some of the girls who pass the Interscience examination with biology group, instead of taking the medical courses, take up nursing, they will have a splendid opportunity of being leaders of the profession in a short time. After taking the basic course in nursing, which is of 3 years duration, they can further train as midwives, health visitors or the post-graduate courses in children's nursing, theatre work, infectious diseases or the sister tutor's course. Scholarships for most of these post-graduate trainings are available, as also in nursing administration such as matrons and assistant matrons.

One thing about the nursing education which is not generally realised is that unlike other courses, the nursing course is not expensive In all the training schools for nurses, boarding and lodging is given free and in addition the pupils get some stipends. Thus from the commencement of her training, a pupil begins to earn her boarding and lodging.

The prime necessity which is before us is to improve the position of nurses so far as their hours of work and conditions of living and pay are concerned. My experience, as one of the members of the Visiting Committee of the Bombay Nurses, Midwives and Health Visitors Council, is that in several hospitals, both Government as well as charitable, the quarters for nurses are far from satisfactory. There is over-crowding, lack of adequate messing arrangements and very few recreational facilities. Moreover, there is a tendency in most hospitals to treat probationer nurses as a form of cheap labour for work in the wards. This notion must be dropped altogether and the training of nurses should be the primary consideration of a nurses' training school.

The pay that is offered to nurses is also very low when compared to the strenuous work that they have put in. It is no use spending money in establishing big hospitals without making a provision for an adequate nursing staff with better pay, fixed hours of work and better living conditions. In England where the status of nurses is much better than in this country, Government appointed a special committee to consider the scales of pay of nurses and their conditions of service. The committee suggested that there should be a uniform scale of pay for all nurses and that Government should pay 50 per cent, of the increased expenditure to the hospital authorities. About the hours of duty the committee recommended that the nursing staff should have 96 hours duty in a fortnight, one complete day-off in a week and 28 days holiday with pay each year in addition to sick leave.

Compared to this the state of affairs in our hospitals is very disappointing. With hardly any exception, nurses in all hospitals are overworked. Very often there are more patients than the accommodation available in the hospital, and hence the nurses have to work for long hours. These make them irritable and disagreeable and consequently some of them leave during the middle of the training: moreover because of the practice of requiring nurses to stay compulsorily on the premises, the social instinct of nurses is crushed It should be realised that nurses are human beings, and more facilities should be given to them to keep in as close a contact as possible with the social life of their family or of their own.

The problem of how to get more nurses of a better class is not a simple one of merely putting an advertisement for suitable young women in a news paper. It involves greater issues which should be carefully studied and a solution should be found. First of all we should be clear about our aim and understand what we have achieved. The present qualification for the admission to the nurses' course is passing the 3rd standard of a secondary school for those taking up the course with a regional language. Persons taking up the course with this general educational background are good bedside nurses but they do not possess the qualities to assume the leadership in the nursing profession or to hold responsible positions. Should we be satisfied with this achievement or should we do something more? To this question, there can only be one answer: *viz*, that we very badly want girls with a higher general education to join the profession.

Many advanced universities in America and other foreign countries have a degree course in Nursing. Why should not our Indian Universities have such a course? The course could be of about 3 years' duration after the passing of the Inter-science examination. In the first year basic subjects like Anatomy, Physiology, Bacteriology and Hygiene together with the history and social aspects of nursing could be taught. The other two years could cover the advanced nursing course.

Another matter to which attention should be devoted is the educating of public opinion. There are even now many persons who have no knowledge of the importance of nursing in all preventive and curative fields. The Committee of Nursing Education for Canada in their report express the nurses' contribution to the community very beautifully. It is the nurse, who probably more than any other professional worker, comes in contact with a great variety of life. By her education she becomes capable of viewing situations objectively and by the intelligent application of general principles she is able to pursue a course of action based on sound reasoning and careful planning. Because of this ability to make the necessary adaptations she is able to assist in bringing about those changes which, in the light of her judgment, would seem to contribute to the welfare of the community. This fact should be brought home to the public by newspaper propaganda, broadcasting and information films.

To sum up we can say that the paucity of good nurses can be attributed to the following four important facts:

1. Long hours of work without sufficient leave and recreational facilities.
2. Meagre pay and other allowances.
3. Poor, unhygienic living accommodation for them in their quarters and poor messing arrangements.
4. Strenuous duty due to over-crowding in hospitals.

It is high time that immediate attention was devoted to remove these unattractive conditions in our hospitals.