

Much more might be said about the encouraging features in the development of the profession of nursing but it is enough to say that leaders of nursing in America are still striving for better preparation for student nurses, seeking for ways and means of solving the problems that confront the profession and endeavouring to provide still better nursing care for the sick.

NOW AND THEN

BY MISS J. W. C. GRAY

IN 1892 I came out to the Victoria Hospital, Benares as a Medical Missionary for the first time and had the great privilege of working with Dr. Railthorpe who started the medical work in Benares and afterwards the Sanatorium for Tuberculosis in Almora. Coming from the splendidly disciplined, well trained and efficient staffs of London Hospitals, I received what might be called a few shocks. Even now I expect new doctors and nurses coming out from home may receive some but I hope not such severe ones.

We had as a matron a woman trained in this country. Purely English, but not cultured or refined, loud-voiced, and who had very little power over the four Hindustani nurses we then had. At first each nurse bought and cooked her own food and then squatted on the ground and ate with her hands, and occasionally would refuse to do very necessary work because she had to eat with her hands and did not want them defiled.

As each cooking her own was a waste of time, we arranged that there should be a cook, and for each nurse to pay a certain amount for food; the sum was put into the matron's hand and she was made responsible for it. When Dr. Railthorpe was away in the hills she came to me and said she would not do it. I asked why? She said "It's impossible for me to do it, the nurses have said I mixed mutton and beef: they have told it in the village and my character has gone". That did not seem to me a heinous sin, but I enquired if she had done it; of course not, would she do such a thing? After a long talk I managed to get her to go on with the work and not to mind what was said about her if the statements were untrue. I mention this fact because it shows her mentality.

In these days I took every pulse myself: did all the dressings, passed every catheter and supervised the making of all the peptonised milk. I washed all the eyes, applied silver nitrate, salt solution and Ol. Ricini. When a patient died Dr. Railthorpe and I lifted the body and put it in the *dholi* because we were morally certain that the nurses would refuse to touch it.

I remember a nurse to whom I gave some milk one evening because I thought she was tired, pouring it into the drain around the verandah. The same girl was fined two rupees because she asked permission to go to her mother in the village; I refused because her mother, although nominally a Christian, was a very unsafe guardian for any young girl. She had been brought up carefully in the Normal School until she was sent on to Hospital to be trained as a nurse. That was in 1893. In 1913 I saw the Lady Doctor who was in charge of the Women's Hospital in a big town in the U. P. She told me that Hermina, as we always called her, was her greatest help and stand-by; that she was much more in request for midwifery cases than the Sub-Assistant Surgeon, that her reliability, honesty and good temper made her a most excellent compounder and she did not know how she could have done without her. She was more useful to her than anybody else in the Hospital. Early in 1922 I saw her again. She had come out 6 miles to see me. Her grandson was sitting for his matriculation examination. Although a grand-mother she was still working hard and thoroughly enjoying her work.

A Brahmin woman that we had as an in-patient in the Victoria Hospital, Benares became a Christian and after her training at the convert's home and baptism she took the full training of a nurse, a compounder and a midwife. Her influence was always good, and many people begged for her but she remained in our Mission until October 1913. When she married a widower with three young children she had a trying time for although he was a worker in a Mission he was addicted to drink, and was discharged for that reason. So Manam had the burden of keeping him and his family and has often been in great straits.

When my English Matron took her furlough from Almora I had Manam as Matron and she did splendid work. She was thoroughly reliable and capable of winning respect and also of managing turbulent servants.

On one occasion while she was Matron the mehtar, who was angry with the bearer because he had thrown out tea leaves instead of giving them to him, said that the Mahommedan cook had looked at the Christian bearer's wife. The bearer got hold of a gun and somebody who was very frightened finding the doctor was out, went to Manam. She immediately went to the bearer's house and found him pointing the gun first at one and then at another, declaring he must drink blood to avenge his honour. Manam calmly said, "Give me that gun and you can drink his blood tomorrow." The bearer gave it and she then cleared all the men out of the house.

One evening when the Superintendent and myself came in from a walk Manam came up with two big sticks, the longer of the two tipped

with iron. Manam had been called to settle a quarrel between the Christian bearer and the Hindu paniwala. The bearer had the longer stick tipped with iron, the paniwala the shorter one. The latter was in his house and would rush out trying to get an effective blow in, but generally failed while the bearer managed to inflict some very severe cuts. Manam told us she seized both sticks, poured much cold water on the bearer to cool down his temper, and much cold water on the paniwala's head to stop the bleeding and then dressed his cuts. I thought it was a good thing that we were out because I am not sure that we could have managed as well.

In the early days from 1892 we taught our nurses more or less systematically and always got an outside doctor to examine them. We had them from all parts of Northern India. Mahratta, Bengali and Nepali girls and from the C. P. So for many the Persian Urdu was a foreign language. I gave Huxley's Primer on Physiology to each of them except one who only knew Persian Urdu and wrote her report on a slate in that character.

In 1906 we had an extremely able Marathi girl who knew her practical work and was an ideal nurse, capable of managing patients, junior nurses, and servants, but she had tried two or three times and failed in her written examination. While I was away on holiday the Matron suggested to the doctor who was taking my place that she should give Rurah an oral examination, and a certificate, because she would never be able to pass the written. On my return the doctor told me this and I spent one night in bed formulating the rules that we still have for the North India Examining Board for Mission Nurses. When Dr. Railthorpe a little later arrived she with Dr. Slater, myself and Mrs. Gregory, a Nursing Superintendent of very great experience and many years work in India, drew up the main rules and the marks exactly as they now are: early in 1907 we brought it before the Standing Committee, and then gradually the Board was formed. I was on it as a member of committee and an Examiner in Anatomy and Physiology until I went home in 1914. In 1913 I had 80 papers to correct which I did in the autumn when in a house boat in Kashmir.

Since then Western and Southern India have their Mission Examining Boards. Needless to say Rurah eventually passed the Board Examination—and passed well. But it's not the fact of passing examinations that startles me so much as the things I leave to the nurses that formerly I did myself. Here they do practically all the eye treatments, paint throats, do dressings, give douches, syringe ears, apply splints, insert plugs, pass catheters and give hypodermic injections; things that for many years I had done myself or only had done by a sub-assistant surgeon or occasionally by

junior colleague. Needless to say it makes an immense difference to my work and gives me a much easier time than I otherwise would have had. Also I know of no better work that we can give to young Christian girls, no training that is equal to nursing for developing patience, endurance, tenderness, self-denial, observations and intelligence. A rather indifferent nurse, during the earthquake in 1920 or 1919 when every patient and nurse had left the building, stayed behind to give the comfort of her presence to an English patient who was not able to leave her bed.

Much of the work they are bound to do goes against their inherited instincts. I remember a girl who said she wanted to be a compounder and not a nurse, and when asked why said nurses got so much abuse and compounders not.

I think, although at times it seems a thankless task there is hardly any work that is more useful in many directions than that of training Indian women to be good nurses: and I honour and admire greatly many of the nursing sisters engaged in the work.

"WHAT DO WE DESIRE?"

IT has been said recently by those competent to remark on the subject and in sympathy with nurse's work that if we are to obtain a sufficient number of trained nurses the conditions of service must be made more attractive. To those who have nursed for many years and have seen women of all types pass on in their career both in the hospitals and in other branches of the work outside, this remark must give food for thought.

It is conceded that one needs a comfortable home, where good food is provided besides an adequate remuneration wherewith to provide other necessities of life.

What else do we need if our hearts are set aright to this noble and merciful calling, which we have decided for ourselves shall be our life work?

Does it not strike us sometimes that something perhaps in ourselves is amiss when the above remark is repeated by authority? Are we giving in return to the authorities who are putting in our way, as best they may, the means of attaining our end—presumably to become good nurses,—the loyalty and devotion to duty that surely we dream of when first we don the uniform. We cannot all achieve our dreams but the impulse will not have been in vain if it enables us to look with sympathy upon the more successful efforts of others and upon those who have helped to make us what we are. The corroding influence of routine in Institution life can only be disarmed by maintaining high ideals of the work.