

THE POSITION OF THE SOUTH AFRICAN NURSE.*

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(From *The Bulletin of the International Council of Nurses*.)

NURSING ORGANIZATION IN SOUTH AFRICA.

South Africa was the first section of the British Empire to adopt the principle of the registration of nurses, but only in a partial and incomplete way. This promising start was due largely to the late Sister Henrietta of Kimberley. That registration, however, was not compulsory—it is not today—and therefore was not satisfactory. The need for the compulsory registration of all practising nurses and midwives was felt very keenly by those inside the profession, as also was the necessity for representation on Medical Councils, the bodies which control the destinies of nurses in training and in practice. However, the nurses of South Africa were widely scattered and seldom came into contact with each other; therefore nothing was done towards an organized movement to elevate the profession into line with those of other countries until 1913. In that year the *S. A. Nursing Record* commenced publication, and a year later—after the outbreak of war—the S. A. Trained Nurses' Association came into being, with a membership of under 100. How keenly its advent had been awaited was shown by its subsequent history and by the fact that within seven years, most of them war years, the membership exceeded 1,000. Membership was open to all registered (not merely trained) nurses and midwives, and to them recently has been added mental nurses (female).

I trust it will not be boring, briefly to trace the history of this young organization. During 1914 and 1915 branches were formed in all the large centres of the Union, the delimitation generally following that of the B.M.A. In November 1915 the first meeting of the executive body was held in Johannesburg, and there, after a run of temporary appointments, Miss B. G. Alexander, then Assistant Matron (now Matron) of the Johannesburg General Hospital, was elected Hon. General Secretary, a post which she still fills. It is mainly to her ability and enthusiasm that the success of the Association has been due.

The Association found a keen friend in Lady Buxton, and one of its first actions was to start a fund for the care and equipment of South African nurses on war service overseas. The nurses in England and France formed an Overseas Branch, and this equipment fund, which was taken charge of by Lady Crewe, ran to a very big thing and disbursed thousands of pounds on the equipment of South African nurses at the front. It is a matter of pride that none was overlooked. The High Commissioner in London was given a sum of money, so that any South African girl who was ill or in difficulties was not stranded. The subsequent development of this fund was the formation of a Nurses' War

* Excerpts from the *Medical Journal of South Africa* (Nov. 1924);—Dr. Tremble is an advisory member of the South African Trained Nurses' Association. The successful development of this organization within the last ten years is a great deal due to this highly interested and unselfish friend of the South African Nurses. (C.R.)

Memorial Fund, dedicated to the memory of a number of South African nurses who gave their lives, both in action and by disease, during the Great War. An account of the activities of this fund will follow.

The return of an alleged peace allowed the Association—now grown to big proportions—to turn its attention more to domestic matters. The next general meeting was held in East London in 1917, and since then they have been held annually in Pietermaritzburg, Johannesburg, Cape Town, Pretoria, Port Elizabeth, Durban and Bloemfontein. First of all it elaborated a Sick Fund or Benevolent Society, a form of cheap insurance whereby members exposed to financial hardship through sickness were assisted. The subscription to this Fund was incorporated in the annual subscription of one guinea. Various other internal matters had to be attended to. The Association was registered as a company in the Transvaal and issued a distinctive silver badge, which, it was hoped, should be the mark of the *bona fide* nurse in South Africa.

Then came other matters. The Association took a hand in the evolution of the Nurses' Ordinance in the Cape—a piece of legislation dealing with leave and pensions. It interested itself in matters of the training of nurses and midwives. Most particularly it agitated until it got incorporated into the Medical Bill clauses which gave the profession those privileges of compulsory registration on Medical Councils without which it felt no real progress could be made. Finally, in December 1923 it received its greatest acknowledgment in an invitation from the combined Medical Councils of the Union to attend a Conference in Johannesburg on the question of the training of nurses and midwives. At that Conference practically every suggestion the Association put forward was adopted by the Medical Councils of the Union.

I have always thought and said that the constitution of the S. A. Trained Nurses' Association might serve as a model for the B.M.A. For a guinea a year every member receives the right of membership, the *Nursing Record* monthly, and membership of the Benevolent Society. The Central Board meets once a year and delegates are elected in the proportion of one delegate to 25 members. The expenses of all delegates are borne by the Association—one half from the central funds and one half by the individual branches. No delegate is out of pocket. The Sick Fund pays out about £400 a year and no deserving case has been allowed to suffer through illness. In addition there is the War Memorial Fund, but this deserves a full head to itself.

THE WAR MEMORIAL FUND.

This fund was designed to help aged and incapacitated nurses who were unable to earn a living, but it has grown much beyond the original intention. It is run on a provincial basis, with a central control and the funds already run to some thousands of pounds. The interest on the money invested is distributed amongst aged and necessitous nurses (as apart from the Sick Fund, which is a form of sick insurance). There are many whose later days are being made easier by the operation of this fund. In addition in the Cape there is a Holiday Home for nurses at Hermanus, a house and three acres of ground

kindly given by Mr. H. G. V. Pickstone, where a nurse can have a topping holiday for £5 5s. a month, run by the Fund. Later—and not much longer—there will be in Cape Town a residential club and home for incapacitated nurses. Already no South African nurse need die in poverty or end her days in undue hardship. Can any other organization show a more practical programme in such a time? And this has been done by the nurses themselves—only the few hundreds of them—by a loyal spirit of co-operation and altruism.

NURSING LEGISLATION.

The most important piece of legislation affecting nurses at present under consideration is the Medical and Pharmacy Bill, the nursing clauses of which will place that profession on a sound and professional basis. It provides for the establishment of a nurses and midwives register, and every nurse or midwife practising her art must be registered. Admission to the register is only granted after examination by an approved examining body and after a prescribed course of training in an approved training school, although in the first place any woman who has earned her living by nursing for three years prior to the operation of the Act will be admitted on submitting proof of reasonable efficiency and knowledge. The Governor-General in Council may declare certain prescribed areas in which only nurses so registered may practise and where practice by unregistered women will be a punishable offence. This will leave the scattered country districts open for untrained women to take on cases when a trained nurse is not available. The prescribed areas will presumably be urban areas where there is a plentiful supply of nurses and midwives.

The Bill further provides for the representation of the nursing profession on the General Medical Council. This, when one considers how much of the Council's time is taken up with purely nursing matters, is only fair. The nurses will be entitled to elect two members of the Council, who may be medical practitioners, nurses or midwives, and who shall sit in the Council only when purely nursing matters are being discussed.

The little silver and blue badge of the association is a guarantee of the *bona fides* of the wearer as a registered nurse. Membership of the association is very jealously guarded.

NEW MEMBERS.

NAME.	ADDRESS.	TRAINING SCHOOL.
Ronald A. Andrews	Mar Lodge, Mussoorie, U. P.	Watford Sanitarium, England.
Mrs. M. W. Andrews	Mar Lodge, Mussoorie, U. P.	Boulder Sanitarium, Colorado, U. S. A.
Mrs. J. A. Brown	Mission House, Khanapur, M. & S. M. R.	Sydney Hospital, N. S. W.
Miss D. E. Whitty	Wesleyan Mission Hospital, Hassan, Mysore.	Erdington Infirmary Birmingham.