

37 members attended the Conference and some visitors.

Letters of regret for non-attendance and for the success of the Conference were read. Everyone was disappointed that Miss Thacker was not present but she was prevented from coming at the last minute.

A vote of thanks to Lady Edwards was proposed by Miss Hodgson and seconded by Miss Graham, and passed with acclamation.

Votes of thanks to Drs. Balfour and Campbell were proposed and carried.

A vote of thanks to Dr. Webbe and Staff for their great help in arranging the Conference, and promoting the comfort of the Delegates was proposed and carried.

It was decided that the next Conference should be held in Madras in the last week in January or the first week in February 1924. So ended the twelfth Conference.

"UNION."

(BY MISS WILKINSON.)

IN looking round upon the Nursing World in India to-day it is apparent that the most vital factor to progress which is still lacking is Unity. Compared with other countries such as China, S. Africa, Great Britain and America, India is at a standstill. Here one is up against a stone wall of apathy and indifference of the Nurses themselves, resulting largely from the indifference to the conditions of Nursing in general on the part of leaders of Nursing in the different provinces. The vision of these leaders must not be focussed only upon their own local needs, but must be enlarged to envisualize Indian Nursing as a whole.

In whatever branch of Nursing one is engaged, one is responsible for the prestige and status of Nursing as a profession throughout the whole country.

As we know, most organizations in India are more or less official, and Matrons in this country recognize that the official point of view must have its due consideration, but this should not be at the expense of the efficiency of Nursing.

We suffer from a lack of unity because the Matrons are merely the instruments of the Committee or Board and not co-operating members.

It is true that in many places the opinions of the Matron on important points is asked, but how often does that opinion receive its due consideration from the official side? More often than not she hears no more of the subject.

In several provinces where some form of registration has been formulated or a new Nursing scheme brought forward, the Matrons of the various training schools, either Government, Municipal or Mission, are not consulted nor their opinions asked. Surely on these Committees and Boards the majority of members should be fully trained Nurses who have practical experience in the training of probationers, and the minority members of the medical profession and lay people. It is an insult to the Nursing profession, but it is brought about largely through our lack of unity and active working for Nursing throughout the whole of India.

Many individual training schools have obtained a high standard of Nursing but they are isolated one from another and are therefore unable to advance the cause of registration for which unity is essential. Locally there are organizations, and also for both North and South India there is an United Board of Examiners for Mission and other hospitals. But there has been no linking up, each is independent, and no interchange of ideas has taken place before these were formed.

Some of the Provinces have introduced or are on point of introducing registration for Nurses. But the same difficulty faces them all when Registration is proposed. There is no recognized Central Body to be consulted by the Provincial Government, who can speak with an authoritative and no uncertain voice.

It rests with us to form this Central Body from amongst ourselves.

Only last year the United Provinces Board of Medical Examinations in introducing registration wrote to this Association asking for our Rules *re* Registration, standard and length of training, etc. We should have been able to reply with printed rules, of what we regard as essential for a trained and registrable Nurse. These should not represent the ideas of one province, or one Board of Examiners, but should be the united opinion of Trained Nurses throughout India.

It is a disgrace that Nurses trained in India, such a large part of the Empire, cannot be registered in Great Britain. This is due to our lack of organization and unity in this country where there is no uniform standard.

Cannot we, the Trained Nurses' Association of India, appoint here at this Conference a Committee representative of all the Provinces, to draw up such a form as I mentioned above. So that we can put strongly before each Provincial Board what should be the minimum standard of training required for a Nurse for Registration.

Many will say oh! but India is so huge—, so vast, it is impossible to obtain and work out such a scheme. In reply I would point you to the Nurses' Association of China where such an organization is in working order. I believe that difficulties of transport, communication, etc., are much greater in China than in India, and yet by the united and public spirited efforts of the trained nurses there all this has been accomplished. Do not, oh fellow-

workers in India let us lag behind, but so strive to raise and make our standard of training such that it is worthy of recognition throughout the whole Nursing world.

In conclusion, I beg leave to place the following resolution before the Conference for its consideration :—

RESOLUTION.

That we, members of the Trained Nurses' Association of India, here assembled in Conference, appoint a Committee consisting of 12 members representative of the following provinces, Bombay, Bengal, Madras, United Provinces, Central Provinces, Central India and Berar, Sind, Punjab and North-West Frontier Provinces, Delhi Province, Rajputana, Bihar and Orissa, Burma, Baluchistan. This Committee to draw up and submit to the Executive Committee of this Association full rules for the length and syllabus of training, examination and registration for Nurses throughout the Indian Empire.

A Sub-Committee to be appointed consisting of 3 or 4 members who can easily meet to draft these rules and circulate for comment amongst the members of the Committee.

The rules with amendments, if any, to be submitted to the Executive Committee for sanction and publication.

MEDICAL MAGAZINE PAGE.

From "*The British Medical Journal*."

THE Final Report of the Committee to inquire into the causes and prevention of blindness is now issued. In 1921 there were 34,894 persons "too blind to perform work for which eyesight is essential." Males are slightly in excess of females; 8 per cent. are under the age of 16 years, 37 per cent. between 16 and 50 years, 34 per cent. from 50 to 70 years, 21 per cent. become blind within the first year of life, and thereafter about 10 per cent. for each decade up to 70 years.

The causes of blindness are given in the following order :—ophthalmia neonatorum, syphilis, congenital malformations, surface inflammation in childhood, trachoma, myopia, glaucoma, industrial disease and accident, eye accidents in civil life, blindness due to the war, sympathetic ophthalmia. The incidence of blindness due to ophthalmic neonatorum vary according to the age at which the inquiry was made. The infants being as high as 49·2 per cent., in school children between 20 and 28 per cent. It is