

HOW ARE WE TO OBTAIN A HIGHER CLASS OF INDIAN GIRL FOR TRAINING?

IS IT WISE TO RAISE THE STANDARD?

By

Miss LUCY M. FERGUSSON,

Superintendent of Nurses, B. Z. M. Hospital, Palwal.

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I AM sorry that some others should not have volunteered to write on this subject, because my experience of Indian nurses is limited to the short period of two years, and has been gained in a small Mission hospital where we receive only Native Christian girls for training.

I think, however, it is more difficult to staff a small hospital than a large one with the proper kind of person, suitable for nurse's training, or rather that the kind of girl suitable for such training prefers to go to a larger hospital.

We all agree that at the present stage of development of trained nursing, the highest class of nurse is comparatively rare and admit that it is difficult to know how to secure exactly the right women in sufficient numbers, as the need for their services increases. In many respects, progress has been rapid within the last two years, but the needs of nurses and the means best calculated to produce the highest type of nurse are as yet but slowly realized in many directions.

In the first place, to obtain a higher class of girl, we must have the mental and physical qualifications necessary for nurses more fully understood. The nurses in our Mission hospitals are drawn from Mission schools and orphanages, and I have found that school mistresses and heads of such institutions are sadly lacking in knowledge as to the kind of girls fit to be trained as nurses. One girl was sent to our hospital to train and the letter which she brought with her from her school mistress was to this effect, that she was being sent to us for training as she was not strong enough for teaching work. One of our rules is that every girl must bring a doctor's certificate with her, and we knew at once that if she was not strong enough for teaching she could never stand the arduous strain of nursing, and a few months later that was proved. I have also heard the heads of institutions say, "Oh, such and such a person will do for your hospital as she has failed in her teacher's examinations." My hope for the future of trained nurses lies in the conviction that the value of personal character and technical knowledge will be duly recognized as time goes on. Everything which tends in the opposite direction will inevitably hinder progress. The vital importance of character and the due, not the undue importance of a standard of education cannot be too strongly insisted upon.

A minimum age limit must also be fixed. One great difficulty I find with the majority of girls who present themselves for training is that they are too young. The schools send them out at sixteen or so and such young girls are irresponsible. They will do what they are told when supervised, but it goes without saying that they are unable to take any responsibility or to shew any initiative. I find older girls are more reliable in every way and I would suggest that applicants should not be admitted under eighteen years of age. I know it is difficult in this land, where all girls marry and only put in a short time at some profession, to get girls as old as this.

There should be an entrance examination before a girl is allowed to enter any hospital. It need not be elaborate, but something is essential to ensure that all are able to read and write, and for the North-West Provinces that they are able to read and write Roman Urdu so that they can write reports and read lectures. If they can read and write in one vernacular it is all the better, but I do not hold that it is essential. In our part of the country where we only get village people as patients and those very often the roughest and most ignorant classes, it is not at all essential that the nurses should know English, in fact none of our present staff do. I think, however, that it is essential for a compounder.

Then I would throw in the suggestion that a higher class of girl would enter the profession if she had the hope of gaining a certificate at the end of her training which would be acknowledged by the general public and would enable her to take a position in any hospital. For this to be accomplished, a national examination would have to be established to which all training schools could send candidates. This, of course, would necessitate a uniform text-book and systematic course of lectures during training time.

To obtain a higher class of educated girl, the remuneration must be sufficient. Most educated girls now turn their thoughts towards teaching, the salary usually being higher than that received for nursing.

Is it wise to raise the standard? Yes, I think it is, for one of the noblest professions must need the highest and best obtainable in every way.

The standard of the nursing profession amongst the girls of India must be raised. The idea prevalent in India is merely to be the servant of the doctor or the hospital assistant, not that nursing is an honourable, noble profession in itself.

It is imperative that all nursing superintendents should be absolutely in charge of the nursing and nurses, also that higher positions, positions of trust and responsibility, be open to our Indian nurses.

So very much depends upon nurses that we must have the best. Nurses can scarcely exaggerate the importance of making themselves fit for the trust which is reposed in them. And here let me give one instance of an Indian nurse's disregard of this trust. This nurse was in her third year,

I was wakened one night at about 2 a. m. by the cries of a patient who was evidently in great pain. As the crying continued I went to the hospital and found the patient in great agony. To my surprise I could not find the night nurse in any of the wards, and after calling for her several times, a patient went to fetch her. I found her sound asleep on the hospital roof quite oblivious to all needs of patients.

Even given greater education and refinement, experience teaches us all the dire need of a higher standard of character for our Indian nurses. With a higher standard of education this need may be met to some extent, but much will remain to be done during the time of training; the influence and character of the superintendent helping greatly.

If the work is measured by its difficulties, by the patient courage it demands, by the real strength of character it takes to go quietly on, doing often disagreeable and wearisome duties day after day, and night after night, any thoughtful person must admit that the highest standard possible for our profession, can be deemed but necessary. Although great difficulties confront us, we realize that "Not failure, but low aim is crime."

"Where did you come from?" I said from the dust at thirty yards, seeing them regard me.

"Laodicea," said Mr. Kimborough, and smiled. "Not being a *dervish*, it was too hot. Freddy got tuberculosis. Then Freddy got auricular distension and an aortic aneurism, and cancer, and he was getting on into the secondary symptoms of lockjaw; so he knew it was his liver, and he thought he'd better come."

From "Compensated" by Albert Hickman.