

THE NURSING PROBLEM IN GENERAL HOSPITALS.

BY

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IN the Neyoor Hospital, previous to 1892, when I arrived, whatever nursing had been done (if nursing it could be called) was done by the relatives of the patients under the direction of the dresser in charge. With the exception of some midwifery lectures to a few biblewomen, nothing had been attempted by way of systematic training of women as nurses. Needless to say, I began by "seeing visions and dreaming dreams" of a well organized band of trained "nurse biblewomen" throughout Travancore somewhat on the lines of the Queen's Nurses at home. This I still feel to be a great need and what I would aim for, could we get suitable women, but that is the chief difficulty and I presume that in most country places the same difficulty has been found.

It may not be the same in other General Hospitals; but with us, not only are the male assistants about, but the male relatives of the patients (whether the patient is a man or woman) practically live in the hospital. Not infrequently from six to twelve persons, or even more, if the patient happens to be of some importance in his village, may be seen surrounding a patient. They are given the use of a kitchen in the hospital compound and they bring all their goods and chattels and take up their abode, sleeping in the verandahs, or when they think we are safely housed for the night, surreptitiously slipping into the ward and sleeping on the floor around the patient's bed. While this is obviously most objectionable from our point of view, and a great hindrance to our work in many ways, we feel that our daily work in the wards as seen by these patients' friends is an object-lesson in itself in Christian service which will be remembered by them long after spoken words are forgotten.

It will be seen that we could not expose young unmarried women to such a public life, even if their parents were willing, but we thought nursing might prove a very suitable work for some of the young widows of our Christian community. It was not until after I had been out ten months that a woman of any description could be persuaded to offer for training. The first two who came were practically forced to do so by their missionary as he very much felt the need for some trained women to work among the sick in his district. When they applied to him for work, he promised them work for a year and to pay all their expenses if they came for training for a year at least. One of the two was an utter failure but the other a great success, and through her the prejudice against the work was broken down.

Throughout all our districts in Travancore we have lace and embroidery industries for our Christian women and even though they earn much less than we give our nurses, they much prefer that work in their own homes. We

cannot blame them, but owing chiefly to this fact we have had to accept, with but one or two exceptions, women with much less education than we desired, and just try to make the best we could out of them.

We have seventeen branch hospitals and dispensaries throughout Travancore. Our aim when beginning the work of training native nurses was not only to be able to supply the need of our central hospital, but after two or three years' training to place a nurse first at each of these branches and afterwards as the work became better known and appreciated to supply a nurse bible-woman to some of our larger churches. With this end in view and with a newcomer's usual eagerness to set things "a-humming," I accepted offers of service perhaps too hurriedly, making the mistake of expecting such women to be able to stand alone too soon, and placed them one by one, as we thought them sufficiently experienced, until we had six at various branches. Two of these were married women and were sent back to work where their husbands were employed, and they continue there to this day doing useful work under the charge of the dresser of the hospital. The others were widows with either their mothers or a senior relative to live with them. But notwithstanding these precautions, we found after a few years' experience, that in Travancore at least, the time was not yet when it was for the best of our work or for the women themselves to place our widow women, of the class we can get, in such public positions, cut off as they were from the direct supervision of a European lady. In only one instance could anything be said against the moral conduct of the women, but in the minds of the people they were being classed on a par with the nurses and midwives attached to the Government hospitals where the moral standard is, as a rule, low. We had therefore to come to the conclusion that for the time being, at least, it were wiser to recall all but the married women. I do not in the least, though, give up the hope that we shall yet see our dreams become realities.

For the present we have to recognize the fact that Neyoor has become essentially a training school for men, and until we can have a separate hospital for women, we must be content to have only elderly women about the place and house them away from the hospital compound. Those of us who have attempted to drill method, punctuality, loyalty and obedience into native women of that age, know well what a seemingly hopeless task it is, these being entirely foreign ideas to them. Still I make bold to say the result has, in many cases, far surpassed our expectations. While they do not seem able to rise as yet to responsibility when left to themselves, our experience has been that under supervision they make excellent helpers and amply repay us for all the time given to train them. We have not introduced any set curriculum of study. They are given Miss Walter's admirable book on Nursing for private study, and from time to time I give them simple lectures on elementary anatomy and physiology, and the doctor gives midwifery lectures. A special feature of the latter is that some of our biblewomen and other women

from the districts attend and for their sake the course is condensed into four or five weeks. We give them in that time all the practical work we can, not only in the midwifery but in the general wards. They go away with some knowledge of the use of the catheter, common douche, etc., and often they are able to give valuable assistance to the dressers in the districts. They are taught how to conduct normal labour and up to their capabilities to recognize the abnormal in time to urge the people to send for more skilled assistance. But if these biblewomen did no more than talk to their pupils about what they had seen and heard, it would at least spread the knowledge that many lives might be saved if only they would come to us in time.

I would like to try the experiment of having similar courses in simple first aid lectures on midwifery in the surrounding villages for the Hindu women. I have tried several times to induce some of the more intelligent Hindu people to send some of their own midwives to our classes but in vain, but perhaps if we were to go to them to begin with, they might in time come to us. I have also thought we might well give some elementary instruction in the same lines to the senior girls in our boarding schools before they have to take up home duties. It is an encouraging fact to note that increasingly, even in the rural districts, the more intelligent Hindu families are asking for the services of our trained Christian nurses in their own homes.

We have lately introduced young men as assistant dressers and orderlies for our men's wards, but this has been begun too recently for us to be able to say anything about them.

I am heartily in sympathy with the proposal that our Mission training schools should combine in drawing up a uniform standard of training, etc., and I will gladly fall into line as far as it is possible with such conditions as I have outlined, but from the above it will be readily understood that we cannot take the initiative.

An appreciation: A man went with his wife to visit her physician. The doctor placed a thermometer in the woman's mouth. After two or three minutes, just as the physician was about to remove the instrument, the man, who was not used to such a prolonged spell of brilliant silence on the part of his life's partner, said: "Doctor, what will you take for that thing?"—*Tit-Bits*.
