

of them still no doubt inspired by altruistic enthusiasm and the halo which still irradiates the nurses' work, find themselves simply engaging in one of the many occupations which give an outlet for energy and ability. Love of nursing work is now only one among many more ordinary motives. The question has become one of wage-earning, like typewriting, teaching, domestic work, &c. The objects are determined by the common pressure of life, the questions being: Are the prospects of future permanent employment good? Are the hours definite and short, pay fairly good, and reasonable uncontrolled freedom insured?

In 1895, feeling the necessity for some co-ordination and a standard of training among our own hospital nurses, I sent a circular to those of our nurses who had already become members of the Royal British Nurses' Association, asking if they were willing to form themselves into a nucleus of an affiliated colonial branch. All answered in the affirmative, and I accordingly opened a correspondence with their headquarters in London. The parent association desired all subscriptions to be sent to them, and yet the colonial branch must be self-supporting. No regulations were to be made until assent had been granted from England, and I found it impracticable to secure such a standard enforced by examination as would make a system to meet our needs. Our plea for colonial self-government was not listened to, and the matter fell through. I instructed Mrs. Neill, when in England in 1899, to place herself in communication with the authorities. She had an interview with some of the officers of the Royal British Nurses' Association, and attended their annual meeting. On her report I saw no reason to expect the slightest advantage to accrue to New Zealand from becoming members of the R.B.N.A. They have never seen their way to make admission to their membership any guarantee of efficiency, even now their doors are so wide that membership is no evidence of either professional qualification or character. The R.B.N.A. was founded in 1887 by Mrs. Bedford Fenwick and other women interested in making the profession of hospital nursing a reality instead of a sham. They aimed at attaining the following objects: A legal status and a definite educational curriculum for hospital nurses. The association, after a stormy existence and the exodus of its original founders, has proved itself incapable of attaining these ends. The cause of its failure is self-evident in the constitution of its governing body. The "Matrons' Council" has now become the most effective nursing organization in England, and, hand-in-hand with America, is making strenuous efforts to secure State registration of properly trained nurses after independent examination. Thus, inevitably, the intelligent and earnest reformers have been driven to the same goal as ourselves. Nothing short of this will ever secure for any country efficient and trustworthy nurses.

Here as elsewhere the great difficulty in securing a properly efficient staff of women nurses for our hospitals is rooted in the marriage question, and this, again, is showing itself, even to the ordinary intelligence, to be the most complex and difficult problem our modern civilisation has to grapple with. The old solutions are plainly inadequate. The old reign of custom must give place to some stable and rational basis for family life if our form of the social organization is not to be riven by an unfathomable and impassible "Solution of Continuity." How are we to secure among women who are *gnata pati*, with all the depth of meaning that this conveys to the initiated, the strenuous and sustained effort to which necessity has so long disciplined men? How, indeed! It is clear that we are confronted with a problem which none but the wisest men and women can to any depth realise. Only the fools are confident here. One of its most obvious effects is that the eternally still-hoped-for alternative of marriage paralyses to a very great extent the efforts of all who aim at the association of effort to raise the standard and status of any body of women workers, and of nurses among the rest. Without any definite organization the position and claims of the nursing profession coinciding with the remarkable improvement which has taken place among us, in the general amelioration of labour conditions, have made themselves powerfully felt. Popular sympathy with their work has done a great deal to strengthen them; indeed, this sympathy has gone so far that many serious abuses must arise unless vigorous steps are taken to guide it in safe directions. The eight-hours movement has been more or less completely adopted in all our larger hospitals, though the direct cost is increased by about one-third, while the indirect cost is also very great.

A further evil, which seems inseparable from our system of local government, is the unjustifiable interference of hospital trustees in the selection of probationers and the promotion of nurses. The Matron and the Medical Officer, if they are at all fit for their positions, are responsible for the efficient nursing of the hospital, yet members of Boards combat their recommendations, insist on the appointment and promotion of friends of their own; the consequence is that too often the sisters or charge nurses are not of the best type. Promotion has come to many of them by mere seniority, though they lack the qualities that would make them successful outside the hospital. Satisfied with their pay and position, they remain on, growing hard and mechanical in their work and feeling. Year by year they take less interest in the stream of juniors passing through their wards, are more and more disinclined to expend their time and energy in the careful teaching of what and how to observe, how best to relieve minor discomforts, and to cheer and sympathize with their patients. In other words, they either cannot or do not really train each new probationer.

A ward-sister's main duty is not to do the work herself, but to teach others how to do it, and this capacity, or the lack of it, ought to be the chief element in determining promotion. This consideration ought to deter every self-respecting hospital trustee from meddling with things which he cannot possibly understand, and make him leave all such matters to the responsible officers, who alone can estimate the qualifications required.

Besides these incipient evils which are beginning to afflict the nurses' profession, there are others calling loudly for a remedy. It is only in our larger hospitals that it has been found possible to give any systematic training to nurses, or to provide any satisfactory way of testing and certifying their efficiency by examination. In many hospitals not merely are the probationers not properly