



Seated, from left to right, are Miss Parsons, Mr. Mace, Professor Jenkin, Mrs. Williams, Miss Jebb (Principal), Mrs. Reid, Mrs. Cecil Carter, Professor Edkins and Miss Dorsey. Behind: the 1933/34 international students.

## Florence Nightingale International Foundation

### Presentation of Certificates

**P**ERHAPS it is unwise to make comparisons, yet we cannot help wondering how many people thought this year's Certificate Day at Bedford College for the international nurse students the most successful, the most truly international that had ever been held. And as there were more guests than ever it was good to think that tea in that great garden could be reckoned on with certainty.

Before calling upon Mademoiselle Odier and Miss Jebb to address the audience, Sir Arthur Stanley, chairman of the executive committee of the British Red Cross Society, read out telegrams of congratulation from Colonel Draudt of the German Red Cross, and from the Red Cross Societies of Latvia, Bulgaria and Hungary.

#### "A Gleam of Nostalgia"

Mademoiselle Odier, a member of the International Red Cross Committee, told how, from the very inception of the courses, she had longed to be one of the students, and that though other (and very absorbing) work had claimed her, she felt that such a course would have spared her many hesitations and even perhaps some mistakes. She had always followed the courses with keenest interest, especially Dr. Masarykova's success in helping to establish the international hostel at 15, Manchester Square, where, instead of spending their evenings in a boarding house, the students enlarged their outlook by living together and getting to know each other's point of view. She met many "Old Internationals" in many lands, and was amazed at the sustained enthusiasm with which they were working in their own countries; but she would note "a gleam of nostalgia" when they spoke of Manchester Square, and she was beginning to think that the names of Mrs. Carter and Miss Dorsey were better known in the world than those of many great statesmen.

#### Three Aspects of the Course

Miss Jebb, Principal of Bedford College, had the pleasant duty of welcoming everyone to the ceremony, mentioning first Lord Cecil and the ministers from the Greek, Latvian and Lithuanian legations, who had signified their intention to be present, then the delegates from other countries, and then the seventeen students of

fifteen nationalities who had won their certificates. She also welcomed the partners in the scheme—Mr. Swift, representing the League of Red Cross Societies, Miss Cox-Davies, representing the College of Nursing, and Dame Alicia Lloyd Still, "representing nearly everything," including their new masters, the Florence Nightingale International Foundation, of which Dame Alicia was president. The courses during the fourteen years of their existence had been taken by 240 students from forty-three different countries. The training itself had three aspects: the community life at 15, Manchester Square—"an extraordinary establishment where anything up to twenty nationalities live in harmony"; the professional life, in which the students broadened their experience by classes and visits; and the academic side, in which she herself was particularly interested, for the students were registered with the 600 or so other students who came to Bedford College, to everyone's mutual advantage.

#### A Picked Band

Miss Jebb then spoke of the very important posts many "Old Internationals" were holding in various parts of the world to-day, mentioning particularly those of Princess Schwartzberg at Geneva, of Miss Ida Simmons in the Malay States, of Baroness Hogendorp in Holland, and of Miss Weiss at the Queen's Institute of District Nursing. Five students had become presidents of their national nursing associations, and four had received Rockefeller travelling scholarships. "So, you see, we are training leaders," said Miss Jebb. "Our numbers are not large, but our students are picked." She congratulated the present group especially on the consistently high quality of their work, and explained that those who conducted the courses were in a sense pioneers in their method of awarding certificates—not on a competitive examination but on a careful record of the work done throughout the academic year.

The certificates were then presented to the students by Dame Alicia Lloyd Still, president of the Florence Nightingale International Foundation and of the International Council of Nurses, Miss Jebb announcing the work each student intended to take up subsequently. (The list of students will be found on page 666.)

... for some time in an epileptic colony, but he left it ultimately because, as he said, "the workers there could only see the epileptics."

## The Clash of Loyalties

Another difficulty that you will be called upon to face is that most terrible of all difficulties, the clash of loyalties—loyalty to the organisation in conflict with loyalty to your profession. Attempts may be made to turn you into an investigation officer in compensation cases, but this you must resist, for the more you can dissociate your work from such activities the better for yourself, your work and your relations with the workers and the management.

When you have determined that certain reforms are necessary do not allow yourself to be moved from that decision. A Russian scientist was lecturing in Leningrad on the result of some experiment in food values which had shown that only by consuming  $x$  pounds of food could a man give out  $z$  pounds of energy. The authorities approached the scientist and told him that the economic position in the State was such that a man could not at present procure that quantity of food and that the figures must be adjusted to agree with the economic situation. If there is an evil to be attacked you must stick to your guns and not forsake the position you have taken up.

## The Inner Light

To come back, what is to be your ethical code as an industrial nurse? All I can say to you is that since this branch of the profession is comparatively young you must build up your own codes and observe them. By meeting together, as you are this evening, to exchange experiences you will in time be able to work out these problems for yourselves. There is an inner light waiting to guide you, and when you see it you must follow.

A hundred years have gone since the employers of this country were blotting our civilisation by exploiting their workpeople, and although a great deal has been done to remove that blot a great deal still remains to be done. The value of the work of the nurse in industry has already been proved and there is a great future for this field of endeavour. Apart from your work of healing you are able to bring humanising influences to bear upon industry and to give it a soul. The worker comes to you gladly because he knows that you are not directly concerned with profit or production. It is more than nursing he wants—he needs a confidante, a friend, one who can listen and understand. You will be helping industry to answer the question, Is the machine going to dominate the man or man the machine? It is a tremendous task and will require all your energy, enthusiasm and ability worthily to fulfil it.

## Discussion

During the discussion the following points were raised:

(a) The question of which comes first, loyalty to the patient or to the firm if, for instance, the patient does

not want to return to work? Mr. Hyde replied that this particular instance was a question of fact, whether the man was fit to work or not, but in general there had been far too much hastening of the patient back to work before he was fit. The nurse must stand by her patient.

(b) The rather sad case of the man who is discovered to be just below par at the physical examination on which some firms insist, and is therefore not given employment. In Mr. Hyde's opinion the principle that should govern the decision in a case like this would be, Is the action anti-social? Mr. Henry Ford maintains that a cross-section of his works should be exactly like a cross-section of the community, that is to say, if the community contains  $x$  per cent. of men and women below par, then his works should include the same percentage. On the other hand extremes should be avoided—a milk depot should not include tuberculous workers, nor the staff of engine drivers the colour-blind.

(c) The case of the man with the weak heart, and the difficulty of asking whether he might use the lift, thereby disclosing his weakness to the management, who might count it against him. Opinions differed on this question. If the doctor had been consulted all would agree that the nurse could not go direct to the management herself. It was also suggested that there need be no difficulty if nurse, management and worker openly discussed the matter. It was not the nurse's part to decide. Mr. Hyde, however, reminded his hearers of a recent High Court case in which the judge observed that a man with a hernia was carrying about with him the seeds of a fatal accident, and that to engage such a man for heavy work was the firm's responsibility and future liability.

(d) The improbability of a nurse's running out of iodine, as her supplies would be controlled by the purchasing officer. The speaker explained that, when he used the illustration, he had in mind the smaller factory which had no purchasing department and no special provision for obtaining supplies.

(e) Miss Cowlin, from the chair, suggested that the inner light was sometimes not enough; we must have knowledge. For that reason the College was considering setting up an ethical committee, and for that reason also these "industrial week-ends" were so extremely valuable.

## An Important Nursing Bill

House of Commons, Tuesday, July 10

Sir Gerald Hurst asked leave to bring in a Bill to enable local and county authorities to provide for domiciliary nursing services. He said that the Bill was intended to fill a gap in the existing laws which provided nursing facilities for the poor. The Bill had the support of members of all parties. Local authorities could subscribe to voluntary hospitals, and since 1929 they were under an obligation to prepare schemes, with the approval of the Ministry of Health, for maternity and child welfare service, but at present they were not legally entitled to contribute to voluntary associations which provided district nurses for the care of the poor who could not afford to pay for these services. In districts where there were no nursing associations the work of nursing non-paying patients went unfulfilled, and many cases of tuberculosis, cancer, or ulcer went without nursing care. Owing to this disability imposed on local authorities there was a considerable shortage of district nurses. The Bill enabled local and county authorities to provide domiciliary nursing services, to appoint and pay nurses, to provide accommodation for them, and to make reasonable subscriptions or donations to voluntary associations. (Cheers.)

Leave was granted, and the Bill was brought in.

Lord Cecil of Chelwood, who then addressed the gathering, spoke of the ceremony as a striking and brilliant example of the best kind of internationalism. We were here, he said, to render homage to Florence Nightingale and to set up this foundation as a memorial to her name. Florence Nightingale was one of the great benefactors of the human race; she did as much as any single individual to relieve the suffering and promote the health of her fellow human beings. She had many qualities which helped her to achieve her ends, such as ability and culture, but greatest of all was a deep religious emotion, a religious sense which impelled her to undertake some great work; and such was her fixity of purpose that nothing could deter her from carrying through her object. She was not always a very comfortable person to deal with, and public officials put innumerable difficulties in her path. She could not perhaps be called an internationalist in any formal sense of the word, concluded Lord Cecil, but her work was of the type that knows no national boundaries,

and we were gathered that day to place one more brick on the structure of international progress, a structure on which depended the whole happiness and welfare of mankind.

A vote of thanks to all who had made the last year so successful was proposed by one student, Mrs. Mitra (India). Mrs. Mitra thanked especially the lecturers, who had made even the driest subjects interesting and had cheerfully read pages and pages of essays written in what the students called their "international English."

Miss Brauer (Sweden), in seconding, likened the course to a tree, and the lecturers to good and careful gardeners. The kind and homely atmosphere at Manchester Square was the air in which the tree grew and flourished.

Among those present were the Duchess of Devonshire, president of the National Florence Nightingale Memorial Committee of Great Britain, Mrs. Bedford Fenwick, founder of the International Council of Nurses, and a number of foreign delegates.

### The Inaugural Meeting, July 5, 1934

IN our issue of June 23 we described what one might call the approach, in this country, to the idea of an international memorial to Florence Nightingale, and the steps so far taken by other countries to achieve this end. Thursday, July 5, saw the actual inauguration of the Florence Nightingale International Foundation at a meeting held in London at 15, Manchester Square, the home of the international nurse students whose courses of study at Bedford College and the College of Nursing are to be taken over by the foundation. Before the meeting Sir Arthur Stanley, chairman of the British Red Cross Society, invited the delegates to a luncheon at Claridge's Hotel.

The foundation will be governed by a Grand Council comprising representatives of the International Council of Nurses, the League of Red Cross Societies and the Nightingale Memorial Committees formed or to be formed in each country to further the purposes of the Foundation. (Eighteen such committees have already taken up the project.) One interesting point about the foundation is that the courses, having for long been supported by the League of Red Cross Societies—for the last year they have been in the hands of an interim committee—are already a going concern, so that the actual work of the foundation will begin at once, the League of Red Cross Societies having handed over the equipment and the lease of the students' home at 15, Manchester Square, as a gift.

At the inaugural meeting the following message was read out from Her Majesty the Queen, who thus shows her interest in, and sympathy with, the objects of the foundation.

I am interested to learn that the International Memorial to Florence Nightingale is being inaugurated to-day, and I am glad to know that it is to take an educational form, as this would undoubtedly have commended itself to Miss Nightingale, who had so much at heart the education of nurses and the training of a great nursing service, not only in this country but throughout the world. I extend a warm welcome to all the delegates from foreign lands and from the British Overseas Dominions who have assembled in London for the inauguration of the memorial. I shall follow the progress of the Florence Nightingale International Foundation with interest, and I send to one and all concerned my cordial good wishes.

MARY R.

A telegram was also read out from the Japanese Red Cross congratulating the foundation on its inauguration and extending an invitation to its delegates to attend the International Red Cross Conference in Tokyo next October.

The president of the foundation is to be Dame Alicia Lloyd Still, president of the International Council of Nurses, and Miss Adelaide Nutting (U.S.A.) and Mrs. Bedford Fenwick have been made honorary presidents.

The following honorary officers have also been appointed:—

*Vice-presidents:* Mme. Celmins (Latvia), Mlle. Chaptal (France), Mrs. Draper (U.S.A.), Miss Goodrich (U.S.A.), Miss Jean Gunn (Canada), Miss Hagiwara (Japan), Mlle. D'Haussonville (France), Mlle. Hellemans (Belgium), Miss Margaret Huxley (Irish Free State), Miss Bergliot Larsson (Norway), Dr. Alice Masarykova (Czechoslovakia), Mlle. Odier (International Red Cross Committee), Miss Venny Snellman (Finland), Marchesa di Targiani Giunti (Italy). *Hon. Treasurer:* Sir Arthur Stanley.

Listed below are the nominees appointed by the various societies to the Committee of Management, and also the delegates who attended the meeting:—

*Committee of Management:—League of Red Cross Societies:* Mlle. Odier, member of the International Red Cross Committee; Mr. Ernest J. Swift, secretary general; Mrs. Carter, Chief, Division of Nursing. *International Council of Nurses:* Mrs. Bedford Fenwick, S.R.N., president, National Council of Nurses of Great Britain; Miss Bergliot Larsson, president, Norwegian Nurses' Association; Mlle. Chaptal, president, National Trained Nurses' Association of France. *British Red Cross Society:* Lieut.-General Sir Harold B. Fawcus, K.C.B., C.M.G., D.S.O., director general; Dame Sarah Swift, G.B.E., R.R.C., Matron-in-Chief, Nursing Services. *National Council of Nurses:* Miss M. S. Cochrane, S.R.N., R.R.C., vice-president; Miss E. M. Musson, S.R.N., C.B.E., R.R.C., LL.D., vice-president. *Bedford College:* Miss G. E. M. Jebb, M.A. Cantab., Principal. *College of Nursing:* Miss Cox-Davies, C.B.E., R.R.C., president. There will also be one nominee to represent the Old Internationals Association.

*Delegates present at the inaugural meeting:—International Council of Nurses:* Dame Alicia Lloyd Still, D.B.E., R.R.C., S.R.N., president, International Council of Nurses; Mrs. Bedford Fenwick, S.R.N., president, National Council of Nurses of Great Britain; Miss Bergliot Larsson, president, Norwegian Nurses' Association. *League of Red Cross Societies:* Mlle. Lucie Odier, International Red Cross Committee; Marchesa di Targiani Giunti, Directress of Nursing Service, Italian Red Cross; Mr. Ernest J. Swift, secretary general, League of Red Cross Societies; Mrs. A. Cecil Carter, A.R.R.C., S.R.N., Chief, Division of Nursing, League of Red Cross Societies. *Denmark:* Miss Eli Magnussen, director, School of Nursing, University Hospital of Denmark (Rigshospital). *Finland:* Miss Venny Snellman, president, National Council of Nurses of Finland; Miss Maj-Lis Edgren, directress, State School of Finland, Abo, Finland. *France:* Mlle. Chaptal, president, National Association of Trained Nurses of France; Mlle. Lefebvre, National Association of Trained Nurses of France. *Great Britain:* Sir Arthur Stanley, G.B.E., C.B., M.V.O., chairman, Executive Committee, British Red Cross Society; Miss Musson, C.B.E., R.R.C., LL.D., S.R.N., National Council of Nurses of Great Britain. *Irish Free State:* Miss Alice Reeves, R.G.N., president, National Council of Nurses of the Irish Free State; Miss Grenham, S.R.N., Fever Hospital Dublin. *India:* Miss Abram, president, Trained Nurses' Association of India. *Netherlands:* Baroness van Hogendorp, president, National Council of Nurses of the Netherlands; Miss Boeye, matron, University Hospital, Groningen. *Latvia:* Monsieur Zarine, Minister of Latvia in London. *Norway:* Miss Bergliot Larsson, president, Norwegian Nurses' Association. *South Africa:* Dr. Oreinstein, president, South African Red Cross Society. *Sweden:* Miss Karin Elfverson, secretary, National Florence Nightingale Memorial Committee for Sweden; Miss Lisa Elander, National Florence Nightingale Memorial Committee for Sweden.

*Invited to attend:—United States:* Miss Mary M. Roberts (American Nurses' Association), Mrs. de Wolf Clark (American Red Cross Society). *League of Red Cross Societies:* Lieut.

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**The Inaugural Meeting—Contd.**

Colonel Draudt, vice-president, German Red Cross, vice-president, Board of Governors, League of Red Cross Societies; Mr. L. de Gielgud, under-secretary general, League of Red Cross Societies. *International Council of Nurses*: Princess Anna Schwarzenberg, executive secretary. *British Red Cross Society*: Sir Edward Stewart, K.B.E., M.D., M.R.C.P., deputy chairman, Executive Committee; Lieut.-General Sir Harold B. Fawcus, K.C.B., C.M.G., D.S.O., D.C.L., M.D., director-general; Dame Sarah Swift, G.B.E., R.R.C., Matron-in-Chief, Nursing Services. *Bedford College for Women*: Miss G. E. M. Jebb, M.A. Cantab., Principal. *College of Nursing*: Miss Cox-Davies, C.B.E., R.R.C., president.

## How to Answer the State Examination Questions—(Contd.)

BY THE SISTER TUTOR SECTION, COLLEGE OF NURSING.

### Final Supplementary for Fever Nurses

**Fever Nursing, Question 1.**—*How would you nurse an infant of six months with whooping cough, complicated by convulsions?*

This is definitely a nursing question and therefore should be dealt with as such, mentioning all the points in nursing a severe case of whooping cough and merely stating the particular treatment which might be ordered by the doctor.

A case of whooping cough which is complicated by convulsions is usually a serious one; thus the candidate might begin by describing the routine nursing of the child in a warm, well ventilated room. A gamgee jacket might be ordered because of the risk of broncho-pneumonia. She should mention twice daily bathing, attention to the excretory functions and, as the child is only six months, the changing of the napkins whenever necessary, the care of the buttocks, and the care of the mouth. Special stress should be laid on the importance of supporting the child during its paroxysms of coughing, and assisting it to expel the mucus by wiping with swabs of wool. Here it might be stated that the doctor might order an expectorant medicine to aid in getting up the mucus, also that an abdominal binder sometimes helps the child and may prevent hernia. The feeding is also a most important point, and the nurse should state that rigid feeding hours cannot be adhered to if the child vomits to any extent, but that the feed should be given immediately after a paroxysm, so as to give a chance for digestion to take place before the next fit of coughing; also, and for the same reason, that the feeds might be peptonised. With regard to the convulsions, it could be stated that the doctor would order the treatment but that a child who had convulsions with whooping cough should be under strict observation, and should not be left on any pretext whatever.

The treatment which might be ordered could then be given, such as hot baths during the fit, chloral and bromide administered per rectum, lumbar puncture, or inhalations of chloroform.

**Fever Nursing, Question 2.**—*Why is it important to maintain the functions of the excretory organs during infectious diseases? What measures would you adopt with this object in view?*

The two parts of the question should be answered in turn, the second requiring the longer answer.

The candidate might start by saying that it is important that the functions of the excretory organs should be maintained in infectious illnesses because most of the organisms causing these diseases manufacture either an endotoxin or an exotoxin, which, if not eliminated from the body, will circulate in the blood stream, giving rise to toxæmia, eventually poisoning the whole system. In answering the second part of this question it would perhaps be best to deal with each excretory organ separately, giving the measures used and any special points concerning them.

**Kidneys.**—Give plenty of fluids in addition to the amount of milk ordered, such as unlimited water, barley

water and lemonade, unless contra-indicated by some disease, such as nephritis.

**Bowels.**—Aperients should be given at the beginning of the illness and repeated whenever necessary, except in such diseases as diphtheria and enteric fever, when enemata are usually ordered in preference to aperients. Fruit and fruit juices if allowed in the dietary will help elimination by the bowels.

**Skin.**—The skin should be kept scrupulously clean by bathing or sponging at least daily, so that the pores are not clogged, and if extra excretion is required by the skin, then the addition of heat in some form—hot water bottles, hot air baths or hot packs—may be ordered.

**Lungs.**—Good ventilation is necessary to allow of free interchange of oxygen and carbon di-oxide, also to aid in loss of heat from the lungs.

## News in Brief

### An Inspiring Audience

THE nurses of the Norfolk and Norwich Hospital gave a concert on Friday, June 22, to raise funds towards the £100 they have promised for the Annie Viscountess Cowdray Memorial Fund. We hear that tickets were sold to the public, and that the artistes were greatly inspired by a most appreciative audience.

### To Be Continued

TWO-THIRDS of the nurses' home as originally planned at the Derby City Hospital have been completed, and forty-seven nurses will now be housed in comfort. When the Ministry of Health's restrictions on expenditure, which curtailed the building, are removed and the other wings are added there will be room for about twenty-five more.

### A New Wing

A NEW wing, costing £3,500, was opened by Lord Derby at Waterloo General Hospital (near Liverpool) on July 8. Dr. David, Bishop of Liverpool, and Dr. Downey, Catholic Archbishop of Liverpool, attended a garden fête in connection with the ceremony. The hospital was founded twenty-four years ago, and is still run, by Augustinian Sisters.

### Sleeping on Your Back

BLOOD pressure, it has been found, is much greater when women, whether pregnant or non-pregnant, are lying on their backs than when they are lying on their sides. Although the investigations have not been extended to men, perhaps the same applies in their case also, this increased pressure accounting for the disturbed dreams which come to all of us when sleeping in this position.

### Irish Handicraft

THERE were nearly two hundred guests at an exhibition and sale of handicrafts by patients at Forster Green Hospital for Consumption, on July 3. Miss Hardy, the matron (who is a member of the Council of the College of Nursing), hopes that one day there will be a depot in Belfast for the sale of this work; meantime she is glad to take orders. This was the first exhibition of this kind to be held in Northern Ireland, and prizes were awarded for the best work.

### Infectious Visitors

FROM July 1 the Minister of Health has empowered local authorities to make the same provision for the people within their areas who are suffering from infectious disease as for the permanent inhabitants. Under this provision, for example, cases of infectious disease occurring among the great army of hoppers who come down to the Kentish hop gardens every year from London need not be sent back to London for treatment. As the Ministry's circular points out the population exposed to risk is that of the district in which the disease is discovered, and that particular local authority should be responsible for preventing the spread of disease therein.