Corporation Dinner

Boston October 1932

Coming as it does, at the end of a rich and varied program, the title of my address sounds rather overwhelming. A Study in Contrasts — a comparison of findings in recent surveys of nursing in the United States, England and Canada.

It reminds me of a negro school of nursing which I once visited in the deep South. It had been founded under the auspices of The Sons and Daughters of Protection of America, Canada, and the Isles of the Sea.

So tonight I take for my province America Canada and that Isle of the Sea in which over 60 years ago professional nursing began.

~~You printed program leaves out "England" from title. Well - Boston has always had trouble with the English - but in spite of that famous tea party this particular Englishwoman is going to insist on including her native land in the discussion tonight. For without it there could be no Study in Contrasts.~~

If you will allow me to be personal for a few moments I will try to make my general approach clear.

1925 - 1929 - attached to Paris office.

Capacity Field Director.

Duties took me to England - Survey: (1) Calm Pt.

Canadian Survey: (2) in touch throughout and just returned from visit to Canada.

For the past year: attached to Committee on Grading of Nursing Schools:

I do not speak as its representative but as a nurse who has had unusual opportunity of watching developments in 3 countries

May we begin with the Isle of the Sea?

Chief duty to arrange ~~for~~ in England for opportunity for practice and observation for foreign nurses in English hospitals.

Sounds simple: and, in this country would be.

In England: just three difficulties:-

(a) English do not like foreigners.
(b) Foreigners do not like English.
(c) English do not like being observed.

They have hedges round their gardens.

One enters by invitation - not by solicitation.

While I was persuading homesick Yugoslavian nurse to bear yet a little while with English climate, English cooking, and English hospital discipline! found to great surprise:

Survey of nursing going on:
English nursing being observed -
People looking over the hedge.
People who had not been invited.

Labour Party:
Had just gone out of office. Had gone rather far with social and health programs.
Gave some attention to nursing particularly visiting nursing. Even in opposition continued investigation begun earlier.

Membership of Committee
No representation of nursing organizations or hospitals or medical profession.

Chairman: for a time: Mrs Sidney Webb - who with husband - outstanding English economist -
Secretarial: young fairly reduced social research workers.

Aim:
at first: not interested in nursing education - but in sort of nursing care available for common people in their homes through ministrations of what are known in England as district nurses and health visitors -

This survey was:
Survey of nursing service made on behalf, not of nurses, but of those who are being nursed, when nursed at all by means of base supported and charitable agencies -

Findings:

Discovery of curious fact that officially certificated health visitors might have been prepared in one or more of 56 different ways. The visitors might be nurses or midwives or social workers, or any combination of the three.

Not homogeneous group and not a uniform source.

Not clear what they had to offer.

or

What public had right to expect.

The disparity in preparation so apparent that Committee took a look at the schools of nursing which produced some of them

There seemed to be lack of organization there also, and the Committee, having completed its labours, decided that the hospitals ought to be told about it. The hospital authorities were then invited to a closed meeting so that they might hear of their own shortcomings.

I say closed meeting advisedly. I know just how closed it was because I had such a hard time getting in.

First tried the hospitals - but admission was by ticket - and there were very few tickets.

Went boldly to Labor Headquarters and got a note delivered to the author Henderson - working Rockefeller

Police secretary told me tactfully that while Mr H – knew Mr R. – was a benefactor of mankind: not possible to admit to meeting which did lesser minors like Mr Rock. & other not concern Americans.

Wasn't an American – but still English ~~Canadian~~ still English – though tempered by 30 years of Canada.

Well – if you are pure Colonies –

(No one but Canadian knows how hard it was not to say:

Canada is a Dominion: not a Colony.)

Perhaps Mr H. would reconsider.

Mr H. did – and I was finally admitted – no – not to the floor – but to an observation gallery, where i solitary prendere – surveyed scene below.

Ramsay MacDonald (not the pillar of Conservative Party) briefly opened discussion: disarming fashion-
The Committee dealt gave no quarter: came at squarely with its criticisms, inequality of standards, uncertainty of educational aims, un-coordinated and sometimes inferior nursing service, and, worst of all, from the labour point of view- exploitation of students.

Response.
Great ones listened and said nothing-
Lord Knutsford of London Hospital-
Sir Arthur Stanley: College of Nursing-
The nations of all the great London Hospital- all were silent-

Representatives of nursing associations
regretted mildly that nurses had not
been asked to participate. Labour
malcontents said it was high time
that working conditions for attendants
in mental hospitals were improved.

Otherwise no fireworks whatever.

Anyone who did not know England and
the English would have supposed that
the Nurses had fallen flat.

Far from it. The hospitals were obliged
that anyone should look over their
garden hedge. If he were ignored,
perhaps he would go away. Better
not to take too much notice of him in public,
~~and then~~ Presently one could look about and
see whether what he said was
true. They did look about. They found

some of it was true. Some changes were made in the requirements for health visitors – the complacency of the hospitals was shaken – Some one had dared to look over the hedge and point out the tall weeds in their garden.

Lancet:

In 1930 another survey was made in England. This time under very different auspices – This impetus from medical profession.

Lancet: B.M.A. directed and financed.

Committee included nurses, – but not as representatives of the profession, hospital administrators, educators and social economists.

Essentially a medical enterprise.

England discovers the Rockefeller Report: 1923

Winslow - Goldmark: Nursing and H.Sd. & U.S.A.

Made enquiries about it and accidentally made further discovery of Grading Committee - Nurses Pots. & Pocket books -

Little too recent - it had only been going 5 years - needed to be seasoned and matured by keeping -

Took a look at both - and went off on a trip of their own -

Aim: of Lancet Survey:

Not nursing service or education in detail:

but to find out why shortage of right kind of probationers and English mind.

Great best hospitals having difficulty.

Plenty of other - but very sent. why?

Investigated living conditions in hospitals, examined and appraised curricula, and investigated, though not thoroughly, economic opportunity for nurses in the various fields.

Findings:

Hours too long.
Discipline: harsh and stupid.
Personal liberty: curtailed.

Suggested:
Revision of curricula,
Changes in State Registration requirements.
Freedom from irritating & petty rules.

Timidly:
deprecated the economic dependence of hospitals on schools of nursing. but accepted it as inevitable.

Reproduction - interest to U.S. & Canada - never mentioned - explicitly though it appears between the lines -

Report published: received considerable comment favorable & otherwise - in nursing press - but is looked upon as having been made from the other side of the hedge - English nursing has yet to be surveyed by English nurses -

Canada

Canadian Survey: C.N.A & C.H.A -

Joint Committee: 1927 - Work began 1929 -

Report published Jan. 1932

Director: education

Dr George Weir; Dept. of Education - Univ. B.C.

Finance: Cha $\frac{2}{3}$ C.h.a. $\frac{1}{3}$
to others - a proportional approx.

CMA: trusts the representatives: participated and authorized publication of report.

Doctors: do not necessarily agree with findings. few here read or understood the report:

worked together during survey - and are serving on Committees to get recommendations adopted.

Hospitals: not represented on Joint Committee - but co-operated very well.

Directors: given wide powers allowed to state his findings without reference even to Joint Committee

Responsibility for Report sharply pressed on Directors.

Scope: deeper & wider than English.

More money: more time: better organized.

Problem in Canada:

Manageable:

218 schools
↓
(2000 odd)
nurses (graduate)

9 provinces
↓
48 odd. in this more favored land

9,594
↓
80,000

18,174
↓
214,000

Ratio: in Canada just as high
relatively: about 1 to 5580 of population.

~~Medicine, visited 109 = 50% schools.~~

Approach:

Resembled: Reading Committee:

Threefold:

Economic:

Educational:

+

Sociological:

Emphasis on insurance and sociological nursing.

Well had work cut out for him:

Report shows familiar picture:

1. Too many weak schools.
2. Poorly prepared students.
3. Chaotic legislation (only 4 varieties remain)
4. Unorganized + highly competitive practitioners.

Well: did not know where to stop. but made

Intelligence tests: 2280 = $\frac{1}{4}$ total students.

Result: Median Intelligence quotient 98.3.

Incase, you like yourself, don't know what this statement means:-

almost half students below average mentality. = not necessarily morons but still on the dull side.

Value of intelligence tests:

Doubtful: because failed to prove ourselves. nevertheless.

What passed you in G.S.A.

You haven't had the test yet.

How by way of Criticism

Criticism

In England: ~~from~~ by the common people: through
(a) a political party:
(b) the Medical Profession: Lancet.

In Canada

by nurses: + through Ctee: Medical profession

In U.S.A.

{ both surveys = primarily nurses

By nurses: Hosp - administration -
education - + to some extent:
medical profession, + the public.

↓

The broadest base of any.
most thorough + for teaching studies -

Direction: (active)

England:
(a) Social research worker -
(b) physician -

Canada:
Education -

U.S.A.
(a) Social research worker: Goldmark -
(b) Statistician -

In no case: a nurse -
Therefore objective and unbiassed.

Method:

England:
(a) Questionnaires -
Witnesses: persons who appeared
+ before committee.

Canada: (method)

Questionnaire -
Director's visits: half schools (109) visited.
Interviews
Meetings.
Intelligence tests.

U.S.A (method)

Questionnaire -
Frequent attendance: meetings of teachers in all part of country -
Interviews -

Wide Publicity:

Marked interest:
In Canada as in England: very little publicity while survey was in progress.
↓
In U.S.A:
Excellent continuing publicity through co-operation of A.J.N. & other professional press.

Advantages of Publicity:

Work of G.C. known in all parts of country and in every school.
In Canada & U.S.A

Results have not yet permeated beyond the leaders - not to the mass.

Findings as distinct from Recommend

An astonishing similarity - in some respects:-

In all 3 countries:

(1) Unequal standards for Schools of Nursing.
(2) Too many poorly prepared students.
(3) Too many week schools -
(4) Too great dependence on student labour by hospitals -

5. Unorganized and competitive private defs.

6. Unsatisfactory legislation concerning nursing education & nurse practice.

7. Uncoordinated and un-integrated public nursing service. p.d. / hosp. / p.l. & attendants.

8. In England & Canada: unsatisfactory methods in examination for R.N.

Remarkable:

In 3 countries:

Unrelated studies: different in approach & method:

agree substantially on

findings

Recommendations:

Grading Committee: not yet formulated so cannot be compared:

Canadian S. + Private Duty

Were laid great stress on P.D.

One whole section: Bridging the Gap.

Patient who needs nursing
↓
nurse who needs work.

Remedy: socialized nursing:

Provincial councils: { medical + lay + nurses
↓
Official registries
↓
Salaried p.d. nurses.
↓
Co-ordination with p.h. nurses
and
attendants + practical nurses.

Practical nurses: attendants: subsidiary personnel

In the English & Canadian Surveys frequent reference is made to the necessity for workers of this type. The problem of their regulation & direction is admitted but they are regarded as indispensable.

The Committee on the Costs of Medical Care in the United States takes the same stand.

No official pronouncement has yet been made by Grading Committee though reference has frequently been made to the existing situation.

Private dut financed by

↓

Compulsory health insurance

↓

Small fees from pts.

↓

Federal + provincial taxation.

Private duty nurses:

Supervised and managed as p.l. now are - through registries

+

prepared to co-operate with subsidiary workers.

Those who wish to remain in free lance practice

↓

free to do so.

Reduction of schools:

Legislative reform:

aptitude & intelligence tests

(actually.)

Provincial courses: nursing: medical: public:
already organized for pst steps -

England

Give her time.

Report in 1932 - (Lancet)

In 1942 - after it has mellowed a bit
they will get round to it -

English: do not take surveys too literally
or seriously. and do not run to meet them as in U.S.A.

do not believe that all of nursing can
caught in the meshes of educational
formulae, or statistical tables or even
legislation, be it even so cunningly
devised -

Nursing is too near the life processes ever to be standardized.
At least that is what the English say!

In Canada.

There is enough of the English spirit abroad in Canada! temper enthusiasm.
nevertheless profoundly influenced

though will not admit it by:
what goes on in U.S.A.

In U.S.A

(1) Probably the last to complete and the first to take action.

(2) Action has already taken place as result of continuing publicity.

Compare in 5 years: & see how far we have gone together. & where paths have tended to diverge.

The point in closing:

Inspired by remark of a British nurse at Labour Party conference -

~~Why~~ strange

"I did not know that so many people had a right to mix themselves up in nursing affairs -"

We should be glad and proud of it -

In all the publications of all the Surveys, and I can say feelingly that they are voluminous, for I have read them all, it is taken for granted that nursing is a necessary and vital public service. We are not strange - we are taken for granted -

Probably no profession has so courageously faced its own shortcomings and deficiencies by and through its surveys -

Perhaps we have overdone it a little.

Presently we shall have had enough of diagnosis and be ready to start on a cure.

The Americans with energy and dispatch.

The Canadians with energy but a little less dispatch, - just enough to keep a little ahead of the English - and not too far behind the Americans -

The English - well - the English perhaps will display little energy & no dispatch - but will rely on that mysterious healing force of time, which in that misty island, brings about more change than we, in this brisk hemisphere even able to admit or realize

All that I ~~think~~ might say of the real value of international co-operation has been better said by a certain proper by the homesick Yugoslavian nurse to whom I referred earlier in the evening. Having survived English cooking, English climate, English discipline – she wrote to me not long ago:–

"When did I leave my own Yugoslavia, I am feeling that frontiers is very high and foreign languages and foods very difficult but now that I have seen, in other countries, what is nursing I am knowing that in nursing is no frontiers and no foreign language. Nursing is one country – and one language – we are together in it.–

It has been a real privilege to be invited to speak to you in this ancient and honorable city — the heart of New England. If I have emphasized contrasts it was to bring out essential unity on most points. No one could have had my opportunities for contact with nursing in so many countries without realizing what an enormous contribution American nurses have made to the profession the world over. Grading Committee not the least

In 1942, when the English set forward to the first report of the Grading Committee, they will profit by it just as they did from the Winslow Goldmark Report. In Central Europe its findings are already eagerly studied.