Twenty-first Annual Report of The National League of Nursing Education 1915
HEADQUARTERS
National League of Nursing Education,
370 Seventh Ave., New York City.
Property of the Society
PROCEEDINGS

OF THE

TWENTY-FIRST ANNUAL CONVENTION

OF THE

NATIONAL LEAGUE OF

NURSING EDUCATION

HELD AT

SAN FRANCISCO, CAL.

JUNE 21 TO 25, 1915

Baltimore
Williams & Wilkins Company
1915
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TWENTY-FIRST ANNUAL CONVENTION

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Sloane Hospital for Women, New York City

Committee on the Isabel Hampton Robb Memorial Fund

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Superintendent, District Nursing Association, Detroit, Mich.
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AMERICAN SOCIETY OF SUPERINTENDENTS OF TRAINING SCHOOLS FOR NURSES

The American Society of Superintendents of Training Schools for Nurses was organized in Chicago, June, 1893. Officers of the preliminary organization were:

Miss Alston, President, Miss Darche, Secretary, Miss Drown, Treasurer.

Officers for years following have been:

1894 New York, January 10-11.
   President, Miss Alston; Secretary, Miss Darche; Treasurer, Miss Drown.

1895 Boston, February 13-14.
   President, Miss Richards; Secretary, Miss Darche; Treasurer, Miss Drown.

1896 Philadelphia, February 11, 12, 13, 14.
   President, Miss Davis; Secretary, Miss Littlefield; Treasurer, Miss Drown.

1897 Baltimore, February 10, 11, 12.
   President, Miss Nutting; Secretary, Miss Dock; Treasurer, Miss Drown.

1898 Toronto, February 10, 11, 12.
   President, Miss Snively; Secretary, Miss Dock; Treasurer, Miss Drown.

1899 New York, May 5-6.
   President, Miss McIsaac; Secretary, Miss Dock; Treasurer, Miss Drown.

1900 New York, April 30, May 1-2.
   President, Miss Merritt; Secretary, Miss Dock; Treasurer, Miss Alline.

1901 Buffalo, Sept. 16-17.
   President, Miss Keating; Secretary, Miss Dock; Treasurer, Miss Alline.

1902 Detroit, Sept. 9, 10, 11.
   President, Mrs. Gretter; Secretary, Miss Dock; Treasurer, Miss Alline.

1903 Pittsburgh, Oct. 7, 8, 9.
   President, Miss Giles; Secretary, Miss Nutting; Treasurer, Miss Alline.

1905 Washington, May 1, 2, 3.
   President, Miss Nevins; Secretary, Miss Nutting; Treasurer, Miss Alline.
1906 New York May —.
President, Miss Goodrich; Secretary, Miss Nutting; Treasurer, Miss Alline.

1907 Philadelphia, May 8, 9, 10.
President, Miss Banfield; Secretary, Miss Nevins; Treasurer, Miss Alline.

1908 Cincinnati, April 22, 23, 24.
President, Miss Greenwood; Secretary, Miss Nevins; Treasurer, Miss Alline.

President, Mrs. Robb; Secretary, Miss Nevins; Treasurer, Miss Alline.

President, Miss Nutting; Secretary, Miss McMillan; Treasurer, Miss Alline.

1911 Boston, May 29, 30, 31.
President, Miss Riddle; Secretary, Miss McMillan; Treasurer, Miss McKechnie.

1912 Chicago, June 2–5.
President, Miss Wheeler; Secretary, Miss Catton; Treasurer, Miss McKechnie.

In June, 1912, the name of the society was changed to The National League of Nursing Education.

1913 Atlantic City, N. J. June 23, 24, 25.
President, Miss Wheeler; Secretary, Miss Catton; Treasurer, Miss McKechnie.

1914 St. Louis, Mo. April 23 to April 29.
President, Miss Noyes; Secretary, Miss Parsons; Treasurer, Miss McKechnie.

1915 San Francisco, Cal., June 20 to 26.
President, Miss Noyes; Secretary, Miss Parsons; Treasurer, Miss McKechnie.

The Society has Affiliations with

American Nurses’ Association.
The American Association for the Study and Prevention of Infant Mortality.
International Congress on Hygiene and Demography.
National Vocational Guidance Association.
American Social Hygiene Association.
PROGRAMME

TWENTY-FIRST ANNUAL CONVENTION OF THE
NATIONAL LEAGUE OF NURSING EDUCATION

Sessions Held in the First Congregational Church, Corner Post
and Mason Streets

Saturday, June 19

7 p.m. to 8 p.m. Executive Committee meeting.
8 p.m. to 9 p.m. Meeting of Council.

Monday, June 21—10 A.M.

Business Meeting of League, Miss Noyes, Chairman.

Call to order.
Report of Officers.
Election of New Members.
Report of Standing Committees.
Report of Special Committees.
Unfinished Business.
New Business.

Tuesday, June 22—11 A.M. to 12:30 P.M.

Conference on Training School Problems, Miss Noyes, Chairman.

"The Social Life of Student Nurses," Miss Mary Riddle, Newton Hospi­
tal, Newton, Massachusetts.
"The Planning and Furnishing of Classrooms," Miss Elsa Maurer, In­
structor, Bellevue Hospital, New York City.

8 p.m. Festival Hall, Exposition Grounds, Miss Noyes, President,
presiding.

Organ Solo—Dr. Maurice W. O'Donnell.
"The Vocational Trend in Education," Edwin R. Snyder, Ph.D., Com­
missioner of Vocational and Industrial Education, California.
"Possible Coöperation Between State Normal Schools and Training Schools," Miss Edna Rich, President State Normal School of Manual Arts and Home Economics, Santa Barbara, California, and Member State Board of Education.

Violin Solo—Miss Mary Pasmore.
Piano Solo—Miss Suzanne Pasmore.

"Existing Affiliations Between Training Schools and Universities," Miss Louise Powell, University Hospital, University of Minnesota, Minneapolis.

WEDNESDAY, JUNE 23, 2.30 P.M.

GREEK THEATRE SESSION

University of California, Berkeley

Miss Annie W. Goodrich
President of International Council of Nurses Presiding

Knickerbocker Male Quartet.
Aria from "Madame Butterfly," "Un bel die" (Puccini), Mrs. Partridge Price. Edith Haines-Kuester, at the Piano.

Greetings from Mrs. Bedford Fenwick, President of the Trained Nurses’ Council of Great Britain and Ireland and Founder of the International Council of Nurses, presented by Miss Hulme of England.

Address, Mr. Chester H. Rowell, Commissioner Panama-Pacific International Exposition Commission of the State of California, and Regent of the University of California.


"The Educational Function of the Hospital," Dr. Winford H. Smith, Superintendent of Johns Hopkins Hospital, Baltimore.

"What the Medical Profession Can Contribute to Nursing Education," Dr. Henry B. Faviil, Chicago.

Prologue from “Pagliacci” (Leoncavallo), Mr. L. A. Larsen. Edith Haines-Kuester, at the Piano.

Groups of Songs (English), Mrs. Partridge Price. Edith Haines-Kuester, at the Piano.

Sextette from “Lucia,” arranged for Male Quartet, Knickerbocker Male Quartet.

WEDNESDAY, JUNE 23—11 A.M. to 12.30 P.M.

Conference on Teaching in Training Schools, Miss Noyes, Chairman.

"What Constitutes Good Teaching?" Anna M. Nicholson, Ph.D., Department of Education, Sacramento, California.
“How to Help Pupils to Study,” Miss Harriet Gillette, Instructor, Long Island College Hospital, Brooklyn, New York.

“The Teaching of Housekeeping in the Training School,” Miss Carrie M. Hall, Superintendent of Nurses, Peter Bent Brigham Hospital, Boston, Massachusetts.

THURSDAY, JUNE 24—11.00 A.M. to 12.30 P.M.

Conference on Practical Problems in Training School Administration, Miss Noyes, Chairman.

“Training School Records,” Miss Pickhardt, Superintendent Pasadena Hospital, Pasadena, California.

“The Eight-Hour Law for Pupil Nurses in California after One and One-Half Years’ Practical Demonstration in a Hospital of 100 Beds,” Mrs. H. W. Pahl, Superintendent Angelus Hospital, Los Angeles, California.


FRIDAY, JUNE 25—9.00 to 10.30 A.M.

Business Meeting of League, Miss Noyes, Chairman.

Unfinished Business.

Election of Officers.

“Self-Government—its Advantages and Limitations as Applied to Schools of Nursing,” Miss Carolyn Gray, Superintendent of Nurses, New York City Hospital, Blackwell’s Island, New York.
Opening address by Clara D. Noyes, R.N., President, National League of Nursing Education. Read at the joint meeting of the three national nursing associations, June 21, 8 p.m.

By the swift but sure flight of time, 1915 has arrived—a date destined to be weighted with deep significance to the entire world and to which our nursing organizations—National and International—had looked forward with eager anticipation. We have come with a definite desire to see and to learn, for California has long been held like "Apples of gold in pictures of silver" in our imagination.

Our pleasure, nevertheless, is tinged with sadness and regret for we had expected to meet with us at the International Congress of Nurses, our sisters from foreign lands. Some of these sisters who even now, as I in this peaceful land write, together with many of our own members under the banner of the Red Cross, are nursing the sick and wounded soldiers and lending aid and assistance to the stricken people in a land laid waste by the most cruel and devastating war the world has ever known.

We, who teach our pupil nurses that all life, even when apparently the most degraded or the most fragile, is worthy of our most tender and sympathetic care, lest in that life the spark of some great and brilliant intellect may already be burning, cannot view this wholesale slaughter, even from a distance, without great
anguish of mind. We are particularly sympathetic with our English sister nurses, for not only have they met with defeat year after year in their effort to secure proper registration laws, with the hope of correcting some of the crippling conditions existing in that country; but they have been further humiliated and belittled by seeing the unskilled and untrained lay worker from all grades of society quite generally made responsible for the nursing of the sick soldier in the present conflict.

We, who have viewed this extraordinary situation from afar have rubbed our eyes and wondered if we have been sleeping and had dreamed that a Florence Nightingale some fifty years ago, had risen to the rescue of the English soldier and subsequently laid the foundation of modern nursing.

Let us not be too complacent, however, for although we are grateful for our splendid nursing organizations, our unity and solidarity, our registration laws—weak and feeble as some of them may be—our Red Cross Nursing Service, our Army and Navy Nurse Corps, our Department of Nursing and Health at Teachers’ College and lastly, but always first, our schools of nursing and the recognition and respect that is universally granted to the graduate from such, we know not how well our unity would stand, should it be subjected to similar pressure.

Far away from the field of action as we are and without the same compelling and disorganizing excuse we have seen the term “Nurse” and the duties of such assumed by American women of all ages and social standing both in the past and at the present time. Nay more, during the present conflict they have pressed to the front, and with much ostentation and newspaper notoriety, have proclaimed themselves as war nurses.

We, who are interested in the larger schools of nursing have been besieged by young women, with strong social backing and evidence of medical support, hardly out of their teens, who wanted a few weeks in our wards and dispensaries, in order, as one said “to get an idea of how a ward was conducted” but above all things, “to learn bandaging.” One would think that all the secrets of nursing lay tightly wound in a roller bandage. Far be it from any of us to discourage or belittle the effort of the lay woman in whatever legitimate way she may at such a time elect. Such desire should be fostered and encouraged, but we should
stand firmly against the assumption by any untrained lay person of the title, uniform or professional duties of the properly prepared nurse. Through the protection of our schools, our professional rights and duties, we protect the community, both in peace and war, from charlatanism and quackery. Are we, as a profession, sufficiently unified to accomplish this?

This can best be answered by a careful analysis of the foundations upon which our schools of nursing are resting, for upon the school the future of our beloved profession is depending. Undowered, dependent upon the hospital with which they are connected for support, they cannot be considered as true educational institutions, for it is a well known fact that all such require money, in order to live. Indeed some of those on boards of control of hospitals unhesitatingly say that the school for nurses is only a department of the hospital, like the laundry and its head a "paid employee," responsible solely for the nursing care of the patient. They seem to fail utterly in comprehending the dual obligation, not only that, to the patient but to the pupil and her future. Important as the pupil may be to the hospital, she is, apparently, far more important to the public as a graduate. Never in the history of nursing has the demand for highly educated and carefully prepared women for the widening field of nursing been so insistent and so persistent.

We view the situation in England with almost sympathetic condescension. Are we justified in so doing? Sum up the evidence presented on all sides. Study the campaign in New York State for the last three years; two of which were spent in trying to secure an amendment to the Nurse Practice Act, to restrict the use of the word "Nurse" when used for the care of the sick, to those properly qualified and the third to bring all schools giving a diploma as a nurse under the Department of Education—a requirement extended to all other types of schools, even chiropody. Study laws existing in other states; in one, no practical examinations are held, because it is not "constitutional for a woman to hold office," the Board of Examiners being doctors, therefore, no practical examinations are given. Could we not do something to bring about greater uniformity and at least establish minimum entrance requirements and thus maintain proper standards of education if our unity and solidarity is as sincere and substantial
as it seems? Do we not sometimes even now hear an occasional nurse say, "What has registration done for me?" or, "Our old system of education was good enough for me," etc., etc.

Friends and members, this is not the moment for any one of us to ask these questions. It is the movement for work individually and collectively. We must work for our schools and suitable endowment for such, our standards of education, and professional work, our organizations, proper laws of control and licensure, our position and professional recognition and above all we must educate ourselves to believe in the dignity of our calling. Nothing ever gains the respect of the world or becomes practicable or reaches beyond the purely practicable, until it has been fought for; until some one believes in the project and makes a gallant fight. We have but to turn to the pages of history, bristling with examples, viz.: the Emancipation of the Slave, Liberty of the Press, Free Education, Equal Suffrage and the highest example of all, the Christian Religion. These have all been found absolutely practicable, now that they have become established facts. Yet, thousands have suffered discomfort, loss, or even died to make them practicable.

We must not lose courage for signs of awakening are manifesting themselves on all sides. Look and you will see them for yourselves. All that which I have asked will come, but only through education. First, in our own ranks, then outside, and in the maintenance and continuation of harmony and unity of thought and action in our dearly loved organizations.

Meeting was called to order at 10.30 a.m. by Miss Noyes, Chairman; Miss Parsons, Secretary, at her desk.

The President: We will ask for the minutes of the last meeting.

Miss Parsons: As the minutes are embodied in this report (referring to proceedings of last annual meeting) and as each and every member has received one, I suppose the report will be accepted.

The President: It would be impossible to read it as there are several hundred printed pages and, as Miss Parsons says, every member of the National League has one, or if not, we always have some copies left over, which we are very glad to sell. The next on our calendar is the treasurer’s report which will be read by the secretary.
**TREASURER’S REPORT FOR THE FISCAL YEAR ENDING DECEMBER 31, 1914**

To balance Corn Exchange Bank—January 1, 1914
To credit of National League of Nursing Education
General Fund................................ $443.53
Education Committee.......................... 178.18 $621.71

To credit of Endowment Fund.................. 693.45 $1,315.16

National League of Nursing Education—January 1, 1914
To balance in Bank............................. $621.71

**Receipts**

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<td>Fees and dues</td>
<td>$1,452.00</td>
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<td>Sale of Reports</td>
<td>12.02</td>
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<td>Bank Exchange</td>
<td>.55</td>
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<td>Funds American Federation of Nurses</td>
<td>146.09</td>
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<td>1,610.66</td>
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**Disbursements**

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| General Expenses:
  Printing and stationery                         | $37.60  |
  Postage                                          | 38.73   |
  Bank changes                                     | 1.05    |
  Clerical assistance                              | 65.75   |
| Total                                            | 133.18  |
| Convention Expenses:
  Reporting Convention Proceedings                | $150.00 |
  Expenses of Arrangement Committee                | 22.07   |
  Badges                                           | 17.44   |
  Publicity                                        | 16.67   |
  Programs                                         | 43.32   |
| Total                                            | 249.50  |
| Miscellaneous Expenses:
  Membership dues (other societies)               | $22.00  |
  Travelling expenses of officers                  | 229.22  |
  Expense of changing name of Society              | 109.55  |
  Expense of Standing Committee                    | 21.17   |
  Expense of Education Committee                   | 22.81   |
| Total                                            | 404.75  |
| Printing Annual Reports:
  19th Report                                      | $312.21 |
  20th Report                                      | 676.11  |
| Total                                            | 988.32  |
| Transfer of American Federation Funds
  To Committee of Arrangement:
    International Council                          | 146.09  |
    | 146.09 | 1,921.84 |
| Total                                            | 1,921.84 |

**Balance on hand January 1, 1915**

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<th>Description</th>
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<tr>
<td>Balance on hand January 1, 1915</td>
<td>$310.53</td>
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## TWENTY-FIRST ANNUAL CONVENTION

### ENDOWMENT FUND

**January 1, 1914**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Balance in Corn Exchange Bank</td>
<td>$693.45</td>
</tr>
<tr>
<td>Interest received on invested funds</td>
<td>1,120.00</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$1,813.45</strong></td>
</tr>
<tr>
<td>Deposited in Union Square Savings Bank</td>
<td>600.00</td>
</tr>
</tbody>
</table>

**Balance in Corn Exchange Bank January 1, 1915**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total</strong></td>
<td><strong>$1,213.45</strong></td>
</tr>
</tbody>
</table>

**Balance in Corn Exchange Bank, January 1, 1915**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>To credit of National League General Fund</td>
<td>$155.16</td>
</tr>
<tr>
<td>Educational Committee</td>
<td>155.37</td>
</tr>
<tr>
<td><strong>To credit of Endowment Fund</strong></td>
<td><strong>1,213.45</strong></td>
</tr>
</tbody>
</table>

*Signed* Mary W. McKechnie, Treasurer.

Found correct June 20th, 1915.

Auditors

- LAUDER SUTHERLAND, R.N.
- MARIA ANNA LAWSON, R.N.

The President: Are there any questions regarding the treasurer's report? Perhaps it might be in order at this time to explain something about the endowment fund, which Miss Parsons has read about. This endowment fund was the fund that was originally raised for the purpose of endowing a chair at Teachers' College. After the gift was received from Mrs. Jenkins we didn't go on any further with the endowment fund. It amounts to about $10,000, and is in the hands of the League, the interest being used from time to time for such purposes as the Committee on Department of Nursing and Health at Teachers' College might decide. What shall we do with the report?

Upon motion of Miss Van Blarcom, seconded by Miss Maxwell, the treasurer’s report was accepted.

The President: The next business on our calendar is the report of the Program Committee. I do not think we need hear any report of this committee beyond the fact that the program which you are using is the result of the work of the Program Committee. I wish to state here that the Program Committee has about the most arduous piece of work of any committee we have. It is a very difficult matter to arrange a program for a meeting that is
to be held far from those who are working on the program. It means a great deal of hard work, the writing of many letters, many conferences, and I don’t think any of us realize the amount of work that is done by that particular committee. Miss Stewart, the Chairman of the Program Committee for two years, has spent much time, thought and energy on this work, and I should be very glad to have a little expression of appreciation from our members to this particular committee.

A motion by Miss Lawson, seconded by Miss Eldridge, that an expression of appreciation be sent to the Program Committee, for their very excellent work, was unanimously carried.

The President: The next report is from the Finance Committee. If there is not any report from that Committee, we will pass to the next, the Department of Nursing and Health, Miss Maxwell, Chairman.

REPORT OF THE DEPARTMENT OF NURSING AND HEALTH FOR THE YEAR ENDING MAY 31, 1915

The Department of Nursing and Health has registered this year, in all, 84 students, roughly divided as follows:

<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>For Training School Administration</td>
<td>25</td>
</tr>
<tr>
<td>For Teaching in Training Schools</td>
<td>20</td>
</tr>
<tr>
<td>For Public Health Nursing</td>
<td>39</td>
</tr>
<tr>
<td>(This latter group includes those preparing for School Nursing, Rural Red Cross work, etc.)</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>84</td>
</tr>
</tbody>
</table>

For the degree of Bachelor of Arts there have entered 16
For the Departmental Certificate requiring two years of College work 19

The rest of the student body is divided into those who have entered for one year only of work and those who are taking specially selected courses. Those who are preparing for Red Cross work belong in this group.

There have been no changes in the staff, and the work has been carried forward throughout the year without any break. At its close, however, we announce with deep regret the resignation of Dr. C. E. A. Winslow who has accepted the appointment of Professor of Public Health at Yale University. It will be difficult
to find anyone who will bring to the Department so fine a spirit and who will cooperate so heartily in its development.

At the request of a good many nurses occupied during the day and unable to attend the regular courses given in the College, special evening courses were offered for the first time in the history of the Department. The result has been interesting. For an evening course given by Miss Goodrich dealing with Current Problems in Training School Work, 80 students registered. For Miss Stewart's course on Nursing Principles and Methods, 50 students registered. A fee was required in both of these courses which were intended for training school workers.

For a third short course on Abnormal Mental States (given without fees) by Dr. Louis E. Bisch, and designed largely for Public Health Nurses, there were from 100 to 130 nurses in attendance. It has been decided to continue some evening work, next year, and at the request of prospective students a course on History of Nursing will be given.

Among the lectures of importance given in the Department during the year were those by Miss Julia Lathrop, Chief of the Children's Bureau, Washington, D. C., on "The Children of the Nation," and by Dr. Rufus Cole, Medical Director of the Rockefeller Institute on "Newer Studies in Pneumonia."

Several letters have come during the year asking if we could provide such training as would fit nurses to become laboratory assistants, either in Health Departments in small towns, in hospitals, or in the private practice of physicians.

The continued interest in School Nursing, and the probability of a considerable demand for specially trained women for this field has led the Department to offer in cooperation with the Department of Physical Education, a special program of study for this work, leading to a certificate.

The demand for our graduates has steadily increased and this year one hundred and fifty-six requests have been received for workers in the following fields:

In Hospital and Training School Work

<table>
<thead>
<tr>
<th>Position</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Superintendent of Hospital</td>
<td>24</td>
</tr>
<tr>
<td>Superintendent of Training School</td>
<td>27</td>
</tr>
<tr>
<td>Instructors</td>
<td>27</td>
</tr>
<tr>
<td>Assistants and Supervisors</td>
<td>21</td>
</tr>
</tbody>
</table>

Total: 99
We note with interest a new type of request. Two or three schools have written asking us to send them some one to take full charge of all the teaching—to plan the curriculum, arrange with the lecturers, etc., and be responsible for the theoretical part of the work of the school. This is virtually a kind of splitting-off from the office of the Superintendent of Nurses that of the Principal of the Training School and it seems to create a new position somewhat beyond that of Instructor.

There have been several students holding scholarships this year:

- Miss Anna Stevens, a scholarship awarded by the Trustees of the Johns Hopkins Training School.
- Miss Maude Muse, a scholarship awarded by a trustee of the Lakeside Hospital Training School.
- Miss Edna Wenger, a scholarship awarded by the Nurses Alumnae and Ladies Auxiliary of the Jewish Hospital Training School, St. Louis.
- The Isabel Hampton Robb Scholarship given by Mrs. Jenkins was resigned by Miss Carolyn Gray when she took up work at the New York City Hospital, and was awarded then to two students, Miss Grace Allison and Miss Hjorids Eklund of Finland.

The Alumnae meeting in January was well attended and our graduates are showing a good deal of public spirit and unity of purpose. The small pamphlet “Opportunities in the Field of Nursing” is in its thirteenth thousand and as many as 300 are ordered at one time. The new pamphlet on “Post-Graduate Study” will be published shortly. Two useful books have been published by our graduates during the year: a revised State Registration for Nurses by Miss Boyd, and a Materia Medica by Miss Parker, our Instructor in that subject.

There are some important problems before the Department relating to its future and the way in which its growth shall be di-
rected. As a graduate department it has proved that it has a well-defined and essential service to perform in training teachers and administrators for our schools of nursing and in preparing for Public Health Work. It is not less important, however, that in the actual education of the nurse the advantages which the University has to offer should be available and fully utilized. The next logical step forward is the development of a University Training School for Nurses in connection, of course, with some hospital of proper standing. To establish such a school on such a basis as would insure sound educational work would mean an endowment of about one million dollars. This seems a large sum, but when we see the ease with which much larger sums are secured by medical schools and other professional schools in connection with universities, and by Women's Colleges in particular, we need not and should not, look upon this as a visionary scheme, impossible of realization. It is, on the contrary, a practical plan for placing at least one School of Nursing on a sound economic basis. I look forward confidently to the ultimate upbuilding of such a school in connection with this University.

Respectfully submitted,

M. ADELAIDE NUTTING,
Director Department of Nursing and Health.

The President: You have heard this very interesting report and I am sure that many of you have thought of things that you would like to know in relation to it. After its acceptance, I should like to have some questions. I am sure there are many exceedingly interesting points and we will have a few moments in which this can be discussed.

Miss Palmer: I would like to ask if the committee have in mind a plan for the development of a laboratory course. I have had a number of requests recently from different parts of the country asking where they can find nurses trained in laboratory work.

The President: Miss Goodrich, who is more familiar with this Department than I, I presume could answer the question.

Miss Goodrich: I do not think, as yet, there has been any plan formulated. It is naturally in mind because demands for such preparation are coming in increasing numbers. The rela-
tionship of Columbia University to the medical school would make it comparatively easy to provide such courses if the demand was sufficient to warrant it.

The President: I would like to say that we have constant applications in our post graduate course for laboratory courses, and also for courses in the administration of anesthetics. We have never developed either of them.

Miss Goodrich: I wonder if the Association members would be interested at all in the way in which the last group of nurses was placed. (Reads list.) These nurses are now earning very good salaries and it is most interesting to see how readily the hospitals respond to the proper requirements as to salaries for women who have been willing to give some years of educational preparation for the position they are seeking. Several instructors are receiving $1200 and maintenance. Lakeside has sent to Teachers’ College for three graduates for that school alone, two at salaries of $1200 and the superintendent’s salary is $1500. No mention is made here of the nurses who have been placed in the Red Cross Town and Country Nursing Service.

Miss Jamme: I would like to ask if there has been any effort made to acquaint the hospitals with the fact that they can send to Columbia. It is a most curious thing, especially in this city where, when a superintendent is wanted, anybody is consulted—a doctor, a private duty nurse, or anyone. The hospitals don’t know that they can send to Teachers’ College and get a superintendent.

Miss Goodrich: I would like to say that the number of nurses qualifying at the College is not sufficiently large for us to ask the hospitals to send in great numbers for them. The demand already exceeds the supply. What we have got to do is to make the nurses understand that there is an opportunity to fit themselves for adequately filling those positions, and also to make them understand that the hospitals of the country are turning to Teachers’ College and that the College cannot meet the demand.

The President: I had a general feeling that Teachers’ College was supplying nurses in all directions and was constantly appealed to. It helped me recently out of a very serious difficulty. As most of you know, I am connected with Bellevue Hospital, which is a city hospital. For four successive years the
Civil Service Commissioner has wanted the nursing staff placed upon the civil service basis. My argument has always been that the time is not ripe for that; that the demand for highly trained nurses far exceeded the supply, and that it was with difficulty we were able to fill our positions, using every available medium. I could not quite convince the commissioner that there was not a very large supply of nurses for administrative positions. Finally, he wrote to Miss Nutting and she convinced him that they could not begin to supply the demand and then he was quite satisfied. I would like to ask if the superintendents of training schools here would let us know how great a demand there is for nurses trained for the administration of anesthetics, outside of hospitals. We have felt in New York that it is of great value within the hospital, but as to whether any large number of nurses should be prepared for that kind of work I am not advised. Are there any representatives of training schools in the far West who could answer that question? Perhaps Miss Jammé, would have some information.

Miss Jammé: I have a great many letters from nurses, asking if there is any law governing the giving of anesthetics by nurses in California and where they may go to get a course in the administration of anesthetics. I do not think there is any hospital in California that is giving a prescribed course in this subject. There are a few small hospitals that are using nurses for that purpose, but I think a very small number.

Miss Mitchell: I know of a good many prominent surgeons who keep their own nurses for anesthetics, but they are not only required to be able to give anesthetics, but I think, do some laboratory work and office work as well. Some surgeons are very busy and have several nurses in their offices but they do not confine themselves to any one special branch of the work.

The President: We will now have the report of the Isabel Hampton Robb Memorial Fund, Miss Nutting, Chairman. The report will be read by Miss Goodrich.
In the early autumn this Committee met a very serious loss in the death of its chairman, Isabel McIsaac, who for nearly four years had guided with much devotion and wise judgment the affairs of the fund. To the very last weeks of her life her interest and activity continued and her latest efforts, made at a time when her feeble strength could ill afford the strain, were in its behalf. In grateful recognition of her long and invaluable services to nursing education this Committee has undertaken to establish some fitting memorial, and plans are now under consideration for that purpose. The following suggestions have been made as to the form it should take: (1) A loan fund for students desiring further education and not able to secure scholarships. (2) A special scholarship to be known as the Isabel McIsaac Scholarship. (3) A traveling fellowship to be awarded at intervals of three or four years. (4) A prize of a sum of money to be awarded annually for the best paper on selected subjects. (5) A course of lectures on some nursing or health subjects to be given annually in some suitable institution. These are some of the suggestions which have been made, and others will doubtless arise. The question of incorporation is still pending, and it seems wise to defer any attempt to settle it until the precise relationship of this Committee to the two national associations is determined. Our lawyer, Mr. Herrick, says that since our committee is a self-perpetuating body it has no legal relationship to the national associations through which it was created. It was presumably not intended by these associations to place these committees on a basis which severed all organic relationship, and this question should be taken up with the Committee on Revision during the year. As soon as our status is clearly settled, there need be no further delay in securing the necessary incorporation.

The Scholarship Committee reports that 26 application forms were sent out, and that 12 candidates applied for the scholarships. Some further applications were received after the awards had been made of three scholarships of the value of $200 each. The successful candidates were: Ruth E. Babcock, graduate of the
University of Minnesota and the St. Barnabas Hospital Training School, Minneapolis, for study in the School of Social Workers in Boston (Miss Babcock was awarded this scholarship last year, but withdrew, renewing her application this year); Blanche Pfefferkorn, graduate of a western high school and of the Johns Hopkins Hospital Training School, Baltimore, Maryland, and now a student in Teachers College; and Margaret F. DeMuth, Pennsylvania Normal School, Lancaster, Pennsylvania, and the Protestant Episcopal Hospital Training School, Philadelphia. The two latter wish to prepare for Training School Administration at Teachers College. There were several other applicants of high attainments whom the Committee greatly desired to include in its awards, and they regretted greatly that the present limitations of the amount available prevented them from doing so.

The Treasurer reports that the fund now amounts to $15,271.47. She calls attention to the fact that efforts to increase it were relaxed when the Relief Fund was started and that this accounts for its slow growth. It is proper now to remind the members of our associations that the sum named in the beginning which we desired to reach in the establishment of this Memorial was $50,000, yet at the end of five years we have secured less than one-third of that amount. It seems evident that if we really intend to carry out our original plan, a new effort must be made and a more vigorous and searching campaign set in motion to secure funds and thus to complete the task to which we have set our hands. We should not content ourselves with a half-finished task, nor be satisfied with a meagre memorial to the woman who gave so abundantly of herself and her work that the lives and opportunities of nurses might be made richer and better. The future will bring new demands and they will press upon us. Can we not this year take up this particular work and devote ourselves with renewed energy and devotion to its completion? During the brief period in which we have been able to award scholarships, there have been 40 candidates (including those for 1915–16) for such aid, and we would have liked to award a good many more scholarships than the twelve which are all that our funds have allowed. Many of our two hundred and fifty alumnae associations have contributed generously; one indeed, with which Mrs. Robb was closely connected, has already given nearly $2000,
but there are others whose interest has not yet been awakened; and this is also true of the fifty or sixty thousand nurses who are all directly or indirectly indebted to the woman in whose memory this memorial is raised. Let us hope to report at next year's meeting that a good share of the desired $50,000 is in the hands of the treasurer or is pledged.

The following discussion followed when the report was read in the American Nurses Association.

Miss Ahrens (Chicago): It seems to me just at this time, after hearing the report of this Committee and its recommendations regarding a memorial to Miss McIsaac, that it is fitting to begin such a fund: and it is with a good deal of pleasure, and considering it a great privilege that I am able to come to this meeting as a representative from her school and mine, prepared to start this fund with $500.

The President: You have heard Miss Ahren's suggestion that the memorial to Miss McIsaac be started and that the Illinois Training School takes the initiative by a contribution of $500.

Miss Ahrens: I will add that the board of directors of the alumnae association also stated that was only a beginning.

This statement was received with great enthusiasm by the delegates present.

A motion by Miss Maxwell, seconded by Miss Hall, that the report of the Isabel Hampton Robb Fund be accepted was unanimously carried.

The President: The treasurer's report might be of interest to you to know how we stand financially.

STATEMENT OF TREASURER ISABEL HAMPTON ROBB MEMORIAL FUND.

There has been collected and deposited with the Merchants' Loan and Trust Co., Chicago, to June 1, 1915 $15,245.47

There has been paid out for thirteen one-thousand dollars interest bearing bonds $13,211.05

<table>
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<tr>
<th>Year</th>
<th>Amount</th>
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<td>In 1911</td>
<td>$7,168.55</td>
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<tr>
<td>In 1915</td>
<td>6,042.50</td>
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<table>
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<tr>
<th>Interest</th>
<th>Deposits</th>
<th>Withdrawals</th>
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</thead>
<tbody>
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<td>$29.90</td>
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<tr>
<td>January</td>
<td>50.00</td>
<td></td>
</tr>
<tr>
<td>February</td>
<td>75.00</td>
<td>100.00</td>
</tr>
<tr>
<td>Month</td>
<td>Interest</td>
<td>Deposits</td>
</tr>
<tr>
<td>------------</td>
<td>----------</td>
<td>-----------</td>
</tr>
<tr>
<td>March</td>
<td>45.00</td>
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<tr>
<td>April</td>
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<td>106.70</td>
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<td>June</td>
<td>50.00</td>
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<tr>
<td>July</td>
<td>45.00</td>
<td>96.45</td>
</tr>
<tr>
<td>August</td>
<td>180.90</td>
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</tr>
<tr>
<td>December</td>
<td>469.65</td>
<td>300.00</td>
</tr>
<tr>
<td>January 4</td>
<td>6,042.50</td>
<td></td>
</tr>
<tr>
<td>January 4</td>
<td></td>
<td>8.00</td>
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</table>

Interest on deposit:

July to January 1915 101.37

Balance January 1, 1914 $6,406.68
Gained from Deposit 1,266.50
Gained from Interest 948.75
Total $8,621.93
Paid out 6,991.00
Balance in Bank June 1, 1915 $1,630.93
(Note last $75 collected since June 1, 1915.)

Mary M. Riddle,
Treasurer Isabel Hampton Robb Memorial Fund.

A motion by Miss Hilliard, seconded by Miss Clelland, that the treasurer’s report on the Isabel Hampton Robb Memorial Fund be accepted, was unanimously carried.

The President: The next is the report of the Membership Committee, Miss Riddle, Chairman.
APPLICATIONS FOR ADMISSION (INDIVIDUAL MEMBERS)

1914-15

Aitken, Annie A. Superintendent Rutland Hospital, Rutland, Vermont.
Allison, Catherine H. Superintendent Proctor Hospital, Proctor, Vermont.
Armstrong, Charlotte. Superintendent Methodist Hospital, Los Angeles, California.
Butterfield, Caroline L. Superintendent Finley Hospital, Dubuque, Iowa.
Cook, Genevieve. Editor, Nurses Journal Pacific Coast, 1143 Leavenworth St., San Francisco, California.
Dancy, Charlotte E. Superintendent Nurses, Latter Day Saints Hospital, Salt Lake City.
Davis, Lina L. Instructor Pasadena Hospital, Pasadena, California.
Dieson, Alma. Superintendent of Nurses, Deaconess Hospital, Grand Forks, North Dakota.
Donnelly, Julia M. Mercy Hospital, Bakersfield, California.
Eicke, Betty. Assistant Superintendent General Hospital, Lawrence, Massachusetts.
Freeman, Suzanne M. Superintendent Worcester Hahnemann Hospital, Worcester, Massachusetts.
Gaggs, Alice M. Superintendent Norton Memorial Infirmary, Louisville, Kentucky.
Gibson, Blanche. Assistant Superintendent Nurses New York Hospital, New York City.
Good, Mary E. Directress of Nurses Milwaukee County Hospital, Wauwatosa, Wisconsin.
Graham, Mabel. Assistant Superintendent Christ Hospital, Jersey City, New Jersey.
Hall, Amelia A. Superintendent of Nurses Lincoln Hospital, New York City.
Hall, Mary I. Superintendent East Bay Sanatorium, Oakland, California.
Heitzenvater, Susan A. Superintendent of Nurses, Punxsutawney Hospital, Punxsutawney, Pennsylvania.
Hodgdon, Marie C. Superintendent of Nurses, Clara Barton Hospital, Los Angeles, California.
HOERMAN, LOUISE. Assistant Superintendent Bismarck Evangelical Deaconess Hospital, Chicago, Illinois.

KIMMICH, KATHERINE. Superintendent of Nurses, Garfield Memorial Hospital, Washington, District of Columbia.

LANGLEY, AIDA E. Superintendent of Nurses, State Hospital, Mendota, Wisconsin.

LARIMORE, DAISY C. Superintendent Bayonne Hospital, Bayonne, New Jersey.

MASEN, IDA M. Superintendent Sequoia Hospital, Eureka, California.

MEIER, LUELLA C. Supervisor of Nurses, Park View Sanitarium, Savannah, Georgia.

MEIKLE, JESSIE W. Superintendent of Nurses, Santa Clara Hospital, San José, California.

MOIR, HELEN M. Superintendent of Hospital and Training School, Telfoir Hospital, Savannah, Georgia.

MORRISON, MABEL. Superintendent Robin Wood Hospital, Toledo, Oregon.

NEWBERG, HILDA. Superintendent Swedish Hospital, Seattle, Washington.

NIFER, CORA V. Assistant Superintendent and Instructor of Nurses, Milwaukee County Hospital, Wauwatosa, Wisconsin.

PAHL (MRS.), HARRIET W. Superintendent Angelus Hospital, Los Angeles, California.

PARISH, SUSAN G. Superintendent of Nurses, Los Angeles County Hospital, Los Angeles, California.

PERRY, AURILLA J. Superintendent Nurses, Pacific Hospital, Los Angeles, California.

POTTS, FLORENCE J. Superintendent Hospital for Sick Children, Toronto, Canada.

RAINES, MARTHA S. Superintendent Oglethorpe Sanitarium, Savannah, Georgia.

RITCHIE, FLORENCE C. Instructor, Angeles Hospital, Los Angeles, California.

ROBBINS, EDITH. Principal Training School, Homeopathic Hospital, Buffalo, New York.

RUSSELL, MAY M. Assistant Superintendent Jewish Hospital, Cincinnati, Ohio.

RUTHERFORD, ANNIE L. Superintendent Flagler Hospital, St. Augustine, Florida.

SAUNDERS, AMY W. Superintendent St. Luke's Hospital, Boise, Idaho.
PROCEEDINGS

SAUNDERS, MARY L. . . . . . . Superintendent Redlands Hospital, Redlands, California.

SCHILL, ANNA M. . . . . . . Superintendent Hurly Hospital, Flint, Michigan.

SCHILLABURGER, M. ELIZABETH, Superintendent Training School St. Mark's Hospital, Salt Lake City, Utah.

SHERMAN, ETHEL . . . . . . Superintendent University of California Infirmary, Berkeley, California.

SIRCH, MARGARET F. . . . Chief Nurse, City Health Department, City Hall, Los Angeles, California.

SQUIRE, MARIETTA B. . . . Private Duty, 275 6th Ave., Newark, New Jersey.

STEVENSON (Mrs.), BEATRICE VAN H. . . . . . . At Home, 1316 85th St., Brooklyn, New York.

SUTHERLAND, MYRAL M. . . . Superintendent Memorial Hospital, Pawtucket, Rhode Island.

TAYLOR, MINNEHAHA . . . . . Instructor East Bay Sanatorium, Oakland, California.

THOMAS, ELIZABETH A. . . . Assistant Superintendent Johns Hopkins Hospital, Baltimore, Maryland.

THOMPSON, DORA E. . . . . . . Superintendent Army Nurse Corps, Room 345½ War Department, Washington, District of Columbia.

TRENCH, AMY H. . . . . . . Instructor, Mt. Sinai Hospital, New York City.

TWISS, MARY L. (Mrs. C. V.). . . At Home, 419 W. 144th St., New York City.

WARD, ELDORA H. . . . . . . Superintendent Auburn City Hospital, Auburn, New York.

WATERS, LOUISE M. . . . . . Head Nurse, Clara Barton Hospital, Los Angeles, California.

WHITE, LILLIAN L. . . . . . . Superintendent of Baby Hospital, Oakland, California.


WILSON, MARGARET S. . . . Superintendent Nurses, Children's Hospital, San Francisco, California.

WOOD, EVELYN . . . . . . Instructor St. Mary's Hospital, Rochester, Minnesota.

WOOD, HELEN . . . . . . Assistant Superintendent Faulkner Hospital, Jamaica Plains, Massachusetts.

STATE LEAGUE APPLICATIONS

Michigan State League of Nursing Education.

Iowa State League of Nursing Education.

Vermont State League of Nursing Education.
The President: This is an exceedingly gratifying report, forty-four members and three state leagues. We have been obliged to defer action on one state league, owing to the fact that it failed to send in its constitution and by-laws. We are a little uncertain about its organization. I wish to state that these state applications have come in very late, and we have not had time to present them to the Credential Committee, but they will be passed upon sometime during the meeting and voted into membership sometime during a later meeting.

Miss DuBois: I am representing the District of Columbia, and I wonder if they have applied for membership.

The President: They are in full membership already. These individual applicants have all been recommended for acceptance by the Credential Committee.

A motion by Miss Eldredge, seconded by Miss Stewart, that the applicants be accepted into full membership of the National League, was unanimously carried.

The resignations of the following members were accepted with regret:

- Mrs. L. F. Lowey (Mrs. Chamberlain)
- Miss M. Ichhaar
- Miss N. A. Simmons
- Miss M. G. Decker
- Miss A. C. Robinson
- Miss Carrie Sloner
- Sister Augusta Margaret
- Floride F. Croft

Publication Committee had no report to make.

The President: The next report on the calendar will be that of the Collegiate Committee, Miss Johnson, Chairman, the report to be read by Miss Eldredge.

Miss Eldredge: I might just state that since sending in my reports (and I was responsible for the states of California, Oregon, Illinois and Wisconsin) I have received a favorable answer from every college addressed. We have some five or six speakers who are ready to speak, college women who are nurses, and although I believe but one address has been made, and that by Miss Florence Patterson, a Wisconsin graduate, the program is open for the next school year. Almost every college expressed their approval that the League is taking up this matter, feeling that it is a step in the right direction. My work was not begun until the month of March.
REPORT OF THE COLLEGIATE COMMITTEE

The Collegiate Committee of the National League for Nursing Education feel in presenting their report for the past year, that though we have no startling results to show, no remarkable achievements, we do feel that we have made a beginning along lines which may be worth following another year.

A list of colleges for women and co-educational institutions as complete as possible, was made throughout the entire United States. The states were apportioned to the various members of the Committee with the understanding that, where possible, some one person should be made responsible for the work done in each state or should send names and suggestions to the Committee.

Thirty-nine states were selected and all have been approached in one way or another. So far as possible a personal appeal was made to some one known to the Committee. Where this was not possible either the State Secretary or the President or Secretary of the Nurse Board of Examiners was asked to help. We are sorry to report that in some cases no reply to our communication was received, doubtless for good reasons, but perhaps next year the opportunity will come for those states to respond.

Possibly the work was started too late in the year, as it was January before a quorum of the Committee could hold a meeting and formulate plans. However in those places in which it was too late for anything to be accomplished this year, an invitation or promise of cooperation was secured for the coming academic year.

The plan of the Committee, in brief, was this: to reach as many college women as possible, also, if practical, high school and preparatory school pupils. When possible, a nurse who was also a college woman was appealed to; but the main point was that the speaker should be a person who could interest the kind of audience desired. In some cases, the work was taken up through the State Leagues, in others, it seemed best to deal directly with the colleges.

In each letter written, the same suggestions were made as points to be incorporated in any address given. (1) What the nursing field offers. (2) Requirements,—physical, educational and practical. (3) What curriculum training schools must provide for pupils without previous uniform education. (4) The possibility of allowances should a uniform college preparatory course
for nurses be given. Miss Mary C. Wheeler, Chairman of the National Bureau on Legislation and Information, 509 Honore Street, Chicago, was given as reference for further information.

The little pamphlet "Opportunities in the Field of Nursing" published by the alumnae in the Department of Nursing and Health at Teachers College, was sent to all who were to speak for us, to twenty-four high schools and preparatory schools, and to several college reading-rooms and public libraries,—in each instance entrusted to some particular person who would see that attention was called to its interest and value to the students.

In the Barnard Bulletin for March there was a short but pertinent article written by Miss Nutting on "Nursing as a Profession." About forty copies of the issue were secured and sent to as many college and school papers as we were able to reach.

It may be of interest to tell you of the work done in the different states, so far as we know definitely. We feel confident that more has been accomplished than can be put into figures.

In Massachusetts, addresses were made at Wellesley, Holyoke, Smith, Radcliffe, Jackson, and four high schools. The pamphlets were sent to Wheaton, Jackson, Boston University, Mount Holyoke, Wellesley, Smith and La Salle. A request came from the registrar at La Salle for several more of the pamphlets to give to students to read when advising them as to future work. Twenty-six were sent to high schools and to private schools, and two to public libraries. Seven high schools replied, promising to call the attention of their students to the pamphlet, and two asked to have speakers. One sent the names of students especially interested. The Massachusetts member of the Committee planned to invite this group to visit one of the Boston Hospitals very shortly.

In the libraries, the booklet is placed where it may easily be seen, and consulted. Copies of the Barnard Bulletin were sent to Holyoke, Radcliffe, Smith, Wellesley, Wheaton and La Salle; but as no replies were received we do not know whether the article was reprinted in the college periodicals or not.

The subject was also presented at meetings of one or two of the college clubs, and the speakers were most cordially received. Miss Parsons was invited to speak before the Women's Educational Association of Boston, one of the oldest and most influential
of clubs. Three requests have come from students in Maine for the booklet.

In Connecticut the high schools and college clubs were the chief point of attack, and several of the pamphlets were distributed.

In New York, addresses were made at Cornell, Wells, Barnard, several of the large high schools, and some of the college clubs. Vassar was unable to have a speaker this year, but plans to include us in their next year's program.

Copies of the booklet were sent to some particular person in each of the colleges, and the Barnard Bulletin was also sent to the editor of each college paper.

In New Jersey, copies of the Barnard Bulletin were sent to a few of the high schools, and plans have been made for several speakers for next year.

In Pennsylvania, the work was taken up with the Director of the Occupational Bureau for College Women, who in turn referred us to the vocational bureaus of the women's colleges, to ask to be included in their lecture courses. This has been done, and the work will be carried out in the next school year. The matter was also brought before the Conference of Women Deans of Colleges held at Swarthmore, and excited keen interest. Further communications were sent to the presidents of graduating classes and deans of women's schools, in addition to the vocational guidance sections, so that a well-planned campaign is already started in Pennsylvania.

The students at Goucher College in Baltimore have been addressed, and copies of both booklet and bulletin sent them.

Real interest and enthusiasm were manifested by the nurses appealed to in both Virginia and West Virginia, but except for occasional opportunities they were unable to take up for us any regular work this year.

The University of Wisconsin, the University of Chicago, the University of Illinois, the Northwestern University, the Illinois, Wesleyan, Milwaukee-Downer College, Knox College and Beloit have all responded favorably and will be glad to have speakers, some of them this spring, some in the autumn. Copies of the Barnard Bulletin were sent to the University of Chicago, Illinois, Wesleyan, University of Wisconsin, Knox College, Emerson Hall, and Beloit.
The University of Oregon responded favorably, and a bulletin was also sent them. Several pamphlets were sent to Arkansas and assistance promised us in the college. In Georgia the work is to be taken up by the Educational Committee of their State Association. Kentucky has promised to help us as opportunity offers. Indiana is working on a plan to send the Teachers College Pamphlet with an Indiana Supplement; to high schools and libraries throughout the state. The State Association is also getting out a pamphlet on "Nursing and Citizenship" for distribution. Many of the women's clubs are interested in taking up the subject.

In Mississippi at the annual meeting of the State Association an address was given on the subject "How Can We Interest the Better Educated Class of Women to Enter Training Schools for Nurses?" The response was enthusiastic and their offer to help generous. In Missouri, the students at Washington University and several of the high schools have been approached and a number of the booklets distributed. The University of Minnesota and the work through that state has been taken up, but no statistical report has been received. Kansas, Colorado and Ohio have also responded favorably, and will do what they can to help us. There are many states from which we have, as yet, received no response, and several in which interest was manifested, but no plan of cooperation at present available.

Our statistics are not remarkable in definite results, although many letters have been written and much time expended by the Committee and by our unofficial associates to whom we would take this opportunity of expressing our indebtedness and our gratitude. The idea, however, has gone forth, and we hope will spread and intensify, and the question of interesting and securing our better educated women for the nursing profession become one of nation-wide importance.

If each State Association and State and City Leagues for Nursing Education would make the subject part of their programs for next year it would be of the greatest help to the members of the next Collegiate Committee.

Respectfully submitted,

FLORENCE M. JOHNSON,
Chairman.
The President: This report is one of very great interest and certainly shows that a great amount of work and thought has been expended upon it.

A motion by Miss Coleman, seconded by Miss Van Blarcom, that the report of the Collegiate Committee be accepted, was unanimously carried.

The President: I wish we might have time to discuss this report, but there is so much on the calendar we will have to move on as rapidly as possible. We will now have the report of the Committee on Vocational Guidance which, in the absence of Miss Stewart, will be read by Miss Van Blarcom.

Miss Van Blarcom: This report really dovetails into the report just given and as it is rather long Miss Stewart has given me permission to abridge it considerably. The report will be published in full however. It is a very readable document.

REPORT OF THE VOCATIONAL GUIDANCE COMMITTEE

The duties of the Vocational Guidance Committee as we have interpreted them are:

1. To keep in touch with what is being done throughout the country in the field of Vocational Guidance.

2. To try to establish connections between nursing organizations and organizations and individuals specializing in Vocational Guidance.

3. To try out means of reaching high school girls most effectively and to present the results to the League. We have centered our attention mainly on the high school problem so that our work might not overlap that of the Collegiate Committee and the Publicity Committee which have both been engaged in the same general field.

4. To gather reliable data about the profession to be used in publicity work.

It is not possible here to outline even briefly the many phases of the Vocational Guidance movement, but it is sufficient to say that it is an organized effort to help young people to see the opportunities in all the various branches of work, to choose the work they are best fitted for, and to get the proper preparation for it.
On the motion of this body at the meeting last year, we applied for corporate membership to the National Vocational Guidance Association and were admitted at the meeting in Richmond, December, 1914. This membership entitled us to representation in the Association and to all the literature that is sent out. If the affiliation is to be really profitable, however, we will have to attend the meetings, meet the people engaged in the work and study the problem at first hand. We were able to secure only a few minutes on the last program to present our special needs and plans, but if we are ready with the material there is no doubt that we will find this an excellent medium through which to reach the people who are directly concerned with the actual guidance of the young people in the schools of the country. It would seem to be a good thing for the local Leagues to get in touch with the local Vocational Guidance Associations in the same way. The personal contact is particularly important.

In recommending a program of work for local Leagues, I will outline very briefly the work which has been done in New York City this year. Talks have been given in all the city high schools. A large number of pamphlets were distributed among the schools to be used for reference reading in connection with vocational guidance classes. These are to remain in the school for future use. Some of our representatives have presented the subject of Nursing at parent’s meetings, in evening classes, and before groups of teachers. Numbers of our committee in other cities have been doing similar work, but it is still largely individual.

We believe that the talks are very well worth while and should be kept from year to year. It is important that attractive speakers should be provided and that the talks should be as direct and practical and concrete as possible. Girls are, of course, particularly interested in stories and personal experiences, but the tragic and sentimental aspects of the subject should be touched on very lightly and the wholesome and normal sides of the work stressed. With older girls, it has been found helpful to run over briefly the essential points to be sought for in choosing any occupation, and then show how nursing compares with other occupations in these essential points. They usually want specific facts such as salary to be expected, hours of work, social advantages, etc. It
is always worth while to describe the many branches of nursing, particularly the new public health fields, because there is a firmly-rooted conviction in the public mind that private nursing represents practically the only future for the girl who enters nursing. The development of nursing work, especially in this country, is also most interesting and Florence Nightingale never fails to charm a group of young women, whatever their vocational interests may be. I have found a great curiosity to know just what kind of things a nurse has to do, and have often wished for a series of photographs or lantern slides illustrating the evolution of the pupil nurse, and showing her engaged in the various duties to which she is usually assigned in the different stages of her training.

A number of valuable suggestions for reaching the intelligent high school girl have been given, among them the following from Meyer Bloomfield, Director of the Vocation Bureau, Boston, who is generally acknowledged to be one of the best authorities on this subject.

I was very much interested in your letter of November 11 and am glad that you are planning a campaign to direct attention to a new and important career for girls. I do not believe that you will get answers of much importance from high school girls as to the pros and cons of nursing, as there is not sufficient information abroad. The pamphlet you suggest will do good; but more effective would be, first, one or two well written and somewhat dramatized articles in a periodical like the Ladies' Home Journal; second, there would be certain travelling exhibits arranged dealing with nursing as a vocation, which exhibits could be placed in public libraries, high schools, and elsewhere. In connection with such exhibits slips of information might be handed out. My final suggestion is that the nurses' societies should give a reception once in a while in various cities, to high school girls and teachers, so as to promote mutual acquaintance. Through this indirect method there are likely to come more results and opportunities for mutual observation.

As an illustration of what can be done through recognized publicity, I would like to mention a very short article on Nursing by Anne Proctor which appeared in the June Delineator. The writer invited any one interested in the subject to write her for further information and mentioned particularly the pamphlet which was published two years ago by the Nursing and Health Branch of the Teachers College Alumni Association. Immediately the let-
ters began to pour in and the requests for the pamphlet from this source have kept up surprisingly ever since.

The final aim of our committee and probably the most important was to gather reliable data to be used in publicity work connected with nursing. There has never been much difference of opinion among nurses themselves regarding the need for the highest type of woman in the profession on the one hand, and on the other, the absolute worth-whileness of the work itself; but the fact remains that highly eligible women are not clamoring to enter in overpowering numbers. We wanted to know just how acute this shortage of good applicants really is, and what reasons, if any, could be assigned for it. We wanted also to know what the average young woman is thinking about this important branch of woman's work and if she does not think of entering it, what is keeping her out. More than all we wanted to have the testimony of nurses themselves about their work, to show the type of woman who is in it, to know about what proportion are really satisfied and happy in it and what they find in it that is most worth while. In short, we wanted to consult the three parties most concerned, the school who wants pupils, the recruits who might but do not enter, and the people who have chosen this field, and are working in it.

Though these inquiries have not all been done under the auspices of the Vocational Guidance Committee, the Chairman and one or more of the members were represented in each of them and the results seem worth noting in this report.

The first investigation was undertaken by a special committee of the New York State League of Nursing Education at the request of the Public Health Committee of the New York Academy of Medicine. The object was "to inquire into the supply of candidates for Nurse Training Schools in New York State and to ascertain if possible to what extent the alleged scarcity of candidates affects the adequate staffing of the hospitals with which these schools are connected." The full report was read at the 1914 meeting of the State Association and can only be briefly summarized here.

The data was compiled from the replies of 69 hospitals of the state representing all types and sizes of institutions. Half of these hospitals suffer from a shortage of applicants, and about
two-thirds find difficulty in securing enough of the kind of applicants who meet their standards. (The educational standard in New York state is one year of high school.) The difficulty was stated by one-third to be on the increase, while the remainder found it increasingly less difficult or about the same as formerly. Of the causes for this scarcity, the educational requirement was most frequently mentioned, but very few wanted the standard reduced. The hours of duty came next, as a definite cause of dissatisfaction, and the lack of social life, inadequate living conditions, age restrictions and limitations due to the character or location of the hospital, where all frequently mentioned. A considerable number blamed the lack of publicity, and a very few thought the educational advantages inadequate. There were many other theories advanced—the rapid increase in the number of hospitals, the opening up of more attractive and less exacting lines of work to women, the hard discipline so unpalatable to the modern young woman, etc.—but these do not crowd into the foreground. When asked to suggest practical means for overcoming the shortage of nurses, the first place is given to shorter hours, next to better living conditions, more recreation and social life, and next greater publicity. As might be suspected, a number want to be left to choose their own educational standards. There are occasional recommendations for a more cordial and kindly relationship between officers and doctors and pupil nurses, and several suggestions for improving the course of instruction.

It is interesting to consider the kind and number of applicants who do want to enter. One large school reports 1387 in a year, and several others count them by hundreds. The small schools certainly have little margin to choose from, but even the larger, well-established and well-known schools, weeding out relentlessly, make up their classes often with the greatest difficulty. As definitely stated the educational requirement is where the shoe pinches most. This means that the great mass of women who aspire to enter nursing schools in New York State belong to a class which could not by any stretch of the imagination be called even fairly well-educated. This is the gist of the problem. Now there are plenty of young women in New York State and all through this country who have had not only one year but four years of high school and are otherwise eligible. The high schools and pri-
private schools of this country enrolled 706,343 girls last year, of which number at least 100,000 graduated from the four-year course. Where do these girls go and why are they not interested in nursing? Over twice as many pupils were attending high school and private school in 1913 as attended ten years ago and yet we find it as difficult as ever to get women with high school education.

An opportunity came to answer this question, at least in so far as it could be answered by the mid-year graduating class of several New York high schools. Miss Soderstrom, one of the school nurses who had become interested in this very question offered to secure the information if some one would supply the necessary funds. Three organizations helped and after distributing pamphlets which the girls were asked to read, they were invited to give full and frank expression to their views on nursing as a possible profession for them.

The number of questionnaires distributed was 1235, of which about half were returned. The average age of these girls was 17½ years, only about one-sixth of them or 102, reaching the age of 19 years, and only twelve the age of 20 years. Only 27 out of the 604 girls (4½ per cent) expressed any interest in nursing at all. A good many were still undecided about their future occupation but the overpowering preponderance of opinion in this group was in favor of teaching. (Stenography attracts a very large number of New York high school girls but these usually take the three-year course so would not be in this group.)

The girls were asked to give their reasons both for and against such a choice. It is interesting to analyze the motives of those who plan to join our ranks. The largest number say it appeals to their interest, some say they are interested in people, some in public welfare, medicine and surgery, science, etc., but most of them say they are just interested in nursing. The next strongest motive or appeal was the opportunity for service. It is variously expressed as “a wish to benefit others,” “to contribute to the real work of the world,” “to save life,” “to be useful.”

The educational and practical value of the work comes next in consideration, the girls stating that the training “broadens the mind,” “is a practical education” and “valuable knowledge for all women to have.”
Personal advantages which they hope to get from the work are not so frequently mentioned, but a few state that it commands fair remuneration or "qualifies for reliable positions."

As to their own qualifications for the work, patience, good health, good nerves, capacity for hard work, experience, sympathy for the sick, and natural inclination are all offered.

In order to find what influences had been at work to direct them into this field, the question was asked how they became interested in nursing. The greatest number 17 said they had been influenced by nurses, 11 by visiting in hospitals or by being patients in hospitals, 6 by books, including the pamphlets supplied them, 3 through physicians, and 3 from having assisted in a doctor's office or sick-room; 5 said they had been interested from childhood; one had been impressed by the regularity and order in nursing and one by hearing people speak highly of nursing. One romantic young woman had been inspired by the example of a heroine in a book, entitled "Good-bye, proud world!" Another says, "I became interested in this work through a friend of mine who is studying to be a trained nurse. She tells me very interesting things concerning nursing; she also likes it very much." Another says, "A health inspector for the city told me about the laboratories of the Health Department and their call for assistants."

The reasons for not choosing nursing are very numerous, and illustrate very interestingly the nature of many of the prejudices against nursing which many people tell us are pretty firmly fixed in the popular mind. The first and chief reason given by half these girls (about 300) was that they simply were not interested in the work or in the case of the few that they actually disliked it. One or two "abhor the very thought of it." The next main reason given by over a hundred girls was that they did not possess the necessary qualifications, had not the temperament, aptitude, patience, courage, poise, gentleness or nerve required for this work. One appreciative young lady draws an alluring picture of the nurse as "the uplifter of humanity—indeed a saint come down from heaven," but adds "as I am not a saint, why should I aspire to nursing when the bigger and finer field of art and design awaits me."

The frequent mention of wounds and suffering and operations
and bloodshed and death, shows that the average New York high school girl has a very lively sense of the horrors and tragedies which the public generally associates with nursing work. “Cannot stand the sight of blood” comes in frequently, though strange to say the ancient plea “I am too sympathetic” is not once mentioned.

A considerable number (78) are quite sure that they have not the physical strength or endurance to meet the exacting demands of nursing, and a few say they are too young. The actual conditions which they object to are frequently not specified, though hard and exacting work is mentioned 28 times and long and irregular hours and heavy responsibility quite frequently. Monotony, confinement, intermittent work, insufficient salary are mentioned by a few, while the lack of social prestige is the sticking point with a half-dozen or more, who state that nurses “are not respected,” “do not meet the best people,” are of inferior social position,” or “are at best heartless machines.” Economic pressure is undoubtedly the primary deterrent with 15 others who say they have neither time nor money to take the training. One rather surprising reason given by 28 of these girls was that the work would take them away from home. In 74 cases, the objection of parents is cited as the dominant reason for not choosing nursing.

This picture of the high school girl in her attitude to the profession is of course not absolutely complete or typical, but it is suggestive. It shows the main lines of influence and some at least of the popular prejudices which have to be attacked before we can be assured of a just appreciation of our work, or a serious consideration of it by any large number of high school girls. The instinctive repulsion against the more unlovely aspects of disease, is perfectly natural but should not be considered too seriously. That other strong instinct for the protection and conservation of life is just as deeply-rooted and much stronger in most women. It only needs the sight of need or suffering to bring this instinct out. That the vast number should dismiss nursing because they have no interest in it is surely because their interest has not been aroused. Girls of this age are idealistic and nursing should make a strong appeal to them if it is presented rightly for their consideration. They are also extremely susceptible to
the influence of those whom they respect and admire. The fine women they are thrown most in contact with are teachers, therefore they naturally drift toward that profession. It is also the line of least resistance for most of them. But if they are to be attracted into the nursing ranks they must have some means of getting in touch with attractive women who represent nursing. Doubtless our school-nurses in the elementary schools are already raising up groups of young devotees who will follow in their footsteps but we sorely need more representatives in the high schools. Much can undoubtedly be accomplished through well-organized courses in Home Nursing and First Aid taught by nurses, but until that work can be developed, we will have to depend on talks and other less personal modes of influence. The objections of parents must somehow be met, though it is far more difficult to reach them.

The plan of the third investigation which was undertaken by this committee covers a rather more extensive field. A few representative training schools were chosen, and the alumnæ associations of these schools were asked to assist the committee in sending out questionnaires to all the former graduates of the school. The questionnaires were designed to secure a good deal of general information regarding health, salaries, working conditions, etc., in the profession and would, we knew be of interest to the associations as well as to us. Thirteen associations replied to our request, guaranteeing the expense of mailing, while we supplied the material. About 5500 copies of the questionnaire were sent out, from which about 550 have been returned. This we confess is a somewhat disappointing response. It was probably a judgment on the chairman for her over-confidence. The statistical experts warned her that she might expect to get about one-eighth return but she was so sure that nurses would create a record. We got barely one-tenth, not even the average of the common herd.

The general results are here somewhat hastily put together. It will be noted in the beginning that the results here given cannot be considered as representing any school, since it takes in only about 10 per cent of the graduates. It is fair to assume that they are probably the most successful and public-spirited members of the graduate body since those who have dropped
out of nursing affairs or who are indifferent to professional advancement are the ones who generally ignore the request for information. Nevertheless the results should be fairly representative of conditions and opinions in the profession generally.

I. Nationality: 84 per cent were born in the United States, 11 per cent in Canada, 3 per cent in Great Britain, and the rest (2 per cent) in other European countries.

II. Age on Admission to Training School:

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We thus see that the age of pupils on entering has been steadily diminishing—an average age of 22 years creates quite a different problem from the average of 25 years when nursing schools began.

III. Education: The statistics regarding educational qualifications are interesting mainly as a means of comparing the subsequent success of those who start out with good educational preparation and those who start poorly equipped.

While there has not been time to give this point very careful consideration, it is evident at once that the group as a whole is well equipped educationally.

The following shows the distribution.

Grammar school only—25.
High school or private school, one year or more—402. Of these 133 had 2 to 3 years in advance of grammar school; 334 had 4 or more years in advance of grammar school; 66 had 1 to 3 years of normal school, and 139 had 1 to 4 years of college (some of these undoubtedly the so-called “Ladies” College which would scarcely count as college education now).

IV. Previous occupation: Out of 493 answering this question about one-half had remained at home before entering the school. 25 per cent entered nursing from the teaching profession (rather an astonishing proportion), while of the remainder the largest group is that from the business occupations, such as stenography, bookkeeping, etc., 9 per cent.
V. Salaries previously earned: The average yearly salary before entering the Training School is $508, the lowest $200, and the highest $1200. It is seen at once that any salary over $700 is quite exceptional.

VI. The cost of training: In one typical school under consideration, pupils have always received a monthly allowance, from which they supply their own uniforms, books, etc. This allowance averaged $144 per year up till 1900, after which it was reduced one-half ($72 per year). Under the earlier conditions over half of those replying state that they lived on their allowance, while the others received supplementary funds ranging from $20 to $300 per year. After the allowance was reduced, only three did without any assistance from outside sources, but still over one-half got along with an extra allowance of only $75 or less per year. This means that over half of the 80 people in this school who give figures at all got through on $150 or less per year, inclusive of allowance. Where the hospital does not supply uniforms and books and no entrance fee is charged, the minimum cost of training, according to these figures, could be put at about $400 to $500 for the three years, of which in the average school over half ($288 or $8 per month) is provided. In every school which paid anything at all some pupils got through without outside help.

VII. Condition of health on entering training: 31 per cent state health above the average; 63 per cent state health about the average; 6 per cent state health below the average; 30 per cent definitely state that they had never had any illness previous to this time. Among the others, the kinds of illnesses mentioned most frequently are the infectious diseases of childhood.

VIII. Effect of training on health: Regarding the general condition of health at the end of their training: 30 per cent say their health was definitely improved; 15 per cent say their health was impaired; 54 per cent say their health was about the same.

On the whole, those who stated that their health was impaired come about equally from the "above average" and "average" classes while of those whose health was improved, the majority were from those who had entered in average or poor health. This is rather interesting because it is so frequently stated that it requires the superlatively strong constitution to stand the rigors of the training.
The reasons given for improved condition of health in the order of the most frequent mention are the regular life mentioned by nearly all, the physical activity, the interesting nature of the work, and the plain, good food. Several who had been in poor health because of some nervous condition give as the main reason that they had no time to think of themselves. Several others mention their happiness and satisfaction in their work as a main cause.

The causes assigned for impairment of health in the order of most frequent mention are: overwork, long hours, worry and anxiety, confinement indoors, night duty and lack of sleep.

Of the whole group answering this question, 28 per cent state that they had no illness whatever during training and lost no time. 28 per cent lost less than 2 weeks, 19 per cent from 2 to 4 weeks and 25 per cent from 1 to 6 months. The kinds of illnesses which they suffered from during training show a few familiar types, tonsillitis standing highest in the order of frequency (mentioned over 150 times), with influenza and colds next, and local infections (septic fingers mainly) next. Typhoid, diphtheria, scarlet fever, anaemia, and various minor infections come in turn. Only 13 suffered from foot troubles, and only 17 from nervous exhaustion. Tuberculosis is mentioned only twice, but it must be remembered that with this, as with foot troubles and some others, the pupil is rarely able to continue her course, so does not come into our group.

IX. It was thought that we might get some idea of the services which had been felt by most to be the heaviest, but there seems to be no unanimity of opinion on this question. While many say night duty, just as many mention day, and the operating room is much less frequently mentioned than the general medical and surgical wards. A few say that studying was the hardest part for them because of the extreme physical fatigue at the end of the day's work. The medical service in typhoid time seems to be reminiscent of most strenuous times for many.

X. Positions and salaries: The kinds of positions occupied at one time or another since graduation by these people range over a very wide field. Only a few have stuck to one branch of nursing work. Institutional positions give both the lowest and the highest salaries ($240 up to $3000 with living). Among 340 who mention their present salary in institutional positions, 15
are receiving $1500 to $3000, 75 are receiving salaries of $1000 to $1500, 150 are receiving $700 to $1000, while 100 go from $400 to $700. Many of these last are just entering the profession. All institutional positions include maintenance, which may be estimated at anything from $400 to $800 per year, depending on location, accommodation, etc. This sum must be added to the salaries above in comparing them with others.

We were very anxious to get at the average yearly salary of the private nurse but most of the returns come in as $21 or $25 per week, which is no criterion at all. Of those people who strike an average, the lowest is $600 and the highest (mental nursing) $1500 per year. The average is $950. Strange enough the salaries for Public Health workers have about the same range, but of course the cost of living is greater in the latter group.

The significant thing is that the group of women who averaged $500 salary when they entered the training school are earning when they leave the hospital, anything from $600 to $1200. The actual outlay required for taking the whole training could be paid by the average worker out of her first year’s salary. The prospects of advancement are undoubtedly better in institutional work than in private nursing though one private nurse states that she has saved over $10,000 in her 24 years of work, besides caring for an invalid mother and educating a nephew, and she is fit for many more years yet. In a postscript she adds, “If I had a thousand years to live, I’d do nothing but nursing.”

XI. Health in active service: Of course the question asked at once is whether the earning capacity can be maintained for any considerable length of time without a breakdown of health. It is currently stated and popularly believed that the average working life of a nurse is 10 years. This has undoubtedly done a great deal to discourage women from entering the profession. It will require the backing of more data than this preliminary inquiry supplies, to disprove such a statement, but the following figures are interesting at least. Out of 395 working members, 39 per cent have spent from 10 to 35 years in active nursing.

Out of the 151 working members of this group who graduated more than 10 years ago, 21 per cent or about 31 have been in active service over 20 years. Of the whole group of 395, 39 per cent have lost no time from illness, though several say that they
have taken rests when necessary. As to the time lost on account of illness, it ranges all the way from a few days to 5 years. The cause mentioned most frequently is nervous exhaustion or "breakdown." No other one disease comes into prominence though there is a very wide range mentioned.

XII. Average length of working year: In comparing various occupations the factor of constancy or intermittancy of occupation is of course to be considered, therefore it is important to determine just what the probability of employment is here. In institutional positions the average working year is 48 weeks, though several people state that they work 50 and 5 at least 52 weeks in the year. Private nursing is very irregular, ranging from 26 to 52 weeks. In several instances it is explained that this is a matter of choice, not lack of work or illness.

It may be interesting to know that 69 per cent of those replying were entirely dependent on the income from their profession, the remaining 31 per cent having some supplementary source of income. About 20 per cent or 108 have others dependant on them to some extent.

XIII. In regard to post graduate work we find that only about 16 per cent have supplemented their training in any way. 5 had attended courses in schools of philanthropy, 2 in medical college, 21 in other colleges (mainly Teachers College) and 57 in post graduate hospital courses.

XIV. The remaining data shows the attitude of these women toward their profession, and their recommendations for improvements in it. The great majority have no regrets at all that they chose this profession, many of them capitalizing or underlining their replies to emphasize the point. 31 or about 6 per cent state that they have regretted their choice. A few say that their regrets are occasional, or due to some physical or temperamental peculiarity which makes them unfitted for the work. Among the reasons most frequently mentioned by these are the heavy physical demands, long hours, indoor work, necessity for constant self-effacement, "particularly trying to women of independent spirit," lack of time and strength to keep up with friends and outside social life, for study, leisure, and self-improvement, and the loss of social position. One speaks of the depressing effect of dealing constantly with illness and misfortune and adds "facing life
as it reads in a doctor's book takes away the finest ideals of life." One states, "I am too nervous and the work worries me. Am much interested in it, would enjoy it if stronger."

Opposed to these rather pessimistic views of the work are the many statements as to the advantages and satisfactions to be found in nursing. These are very fully and positively given. I have classified them under a few main heads but have kept as near as possible to the original expressions and have placed them in order according to the number of times the idea is mentioned.

1. Educational advantages—development of one's powers, etc. A great education, a good preparation for life, helping you to see all sides of life, to get the best out of life, to interpret life on a broader gauge. Helps you to understand human nature, to read character, to study human types. Develops initiative, self-reliance, self-control—makes you able to cope with hard situations. Brings out the best in you, gives more sympathy and charity, develops character.

2. Opportunities for personal and community service. Makes you able to help others, to save life, to relieve suffering, to do something useful and worth while in life. Gives scope for all kinds of activity. Enters to confidence of people and opening to wider work.


4. Economic advantages. Gives independence, good livelihood something to fall back upon. Opportunity to work when you are able and quit when you wish. Absolute freedom when off duty, security if ill. Agreeable living conditions, regular life.

5. Advantages in home and family life. Makes one a better mother, neighbor and friend, helps in the care of one's family especially when there is illness.

A few have summarized their opinions as follows: "Nothing else compares with it in worth-whileness." "It has helped me in more ways than I could name." "Next to motherhood, the grandest profession for a woman." "No profession more broad-
ening and more satisfactory to work up in." “The best combination of head and hand work.”

XV. In spite of these enthusiastic and almost unanimous testimonials, there is some little hesitation when the question is asked “What advice would you give to educated young women who are interested in nursing as a profession?” A few give an unqualified “Don’t.” Nearly all would advise trying it, but there are many qualifying “ifs” and “buts” and many warnings. To begin with, many of those replying would tell the educated young woman frankly what she would expect to encounter, and the picture is not made too alluring. Then they would size her up and make sure that she “has a steady purpose,” “takes the work seriously,” “has the spirit of self sacrifice,” “has strong moral character,” “a genuine love of humanity,” cheerfulness, good health and a real interest in the work. Several warn against entering too young. Unless she has these qualities, especially the last two, and wants to do this work above all things, the general opinion would seem to be that she had better stay out. She is particularly warned against entering with the expectation of making money easily.

There is not perfect unanimity of opinion of course on some of these points, as the following two statements will show. No. 1. “If strong and healthy and intending to live a bachelor life, I would advise her to enter, otherwise the strain is too great.” No. 2. “I would especially advise every girl who intends to marry to study nursing.” Several are careful to warn the intending applicant to be sure that she enters a good hospital, with high standards of training. A few specify a general hospital and several say it should give a training in Social Service and District Nursing. A few advise training in a small hospital, afterward taking a post graduate course in a large one. Some advise her to choose a special branch and prepare for that, while quite a number go so far as to counsel the choice of institutional or social work after graduation rather than private work. There is much friendly council from the older to the younger woman entering nursing. “Rest as much as possible when off duty,” “Keep good hours to guard your health,” “Keep abreast of the times,” “Put your whole heart in it,” “Do thorough, schol-
arly work," "Go in with the aim of raising professional standards," etc.

XVI. The remaining questions are intended to bring out suggestions for improvements in the training.

Q. 15. "In the light of your experience since graduation are there any phases of your training which could have been omitted without real loss to your efficiency?" The most frequent answer to this question is that nothing could have been omitted. This attitude is well expressed by one who says: "No, omit nothing. It all did me good. One learns to be capable through hard experiences and what I was severely criticized for and felt most hurt over, I have never forgotten to my profit."

On the other hand there is a very substantial representation who advocate a reduction in the sweeping, dusting, scrubbing and "maids' work" generally. The reasons given are that it would give more time "for the real care of the sick," to watch symptoms and give really thoughtful and understanding care. This point of view is summed up by a woman who has contributed much to her profession: "Omit a great deal of hard manual work that used up strength too precious to spare. It could easily have been done by maids. It seems to me short-sighted, unwise, criminal economy on the part of the hospital. I had no objection to the work because it was manual labor."

XVII, Q. 16: What subjects or experiences might have been added with positive advantage to your professional life?

The answers to this question were very interesting. Several see no need of any improvement or think the course as at present given practically perfect. There is a wealth of suggestions, however, mainly of added theoretical courses, but only a few stand out prominently. Many recommend a general strengthening of the teaching work, more time for study, more scholarly teaching by experts, better qualified head nurses, and systematic schedules of work. The loudest demand is evidently for social and public health subjects, social service, visiting nursing, preventive medicine. Children's work, obstetrics, contagious nursing, and specializing of private cases, come next with about equal frequency. It is interesting to find a definite demand for etherizing as a course and still more frequently mentioned a course in laboratory work. These are scattered recommendations for better courses in die-
teties, massage, first aid, mental nursing, invalid occupations etc. and for the addition of psychology, rhetoric, languages, history, civics, voice culture, physical culture, teaching experience and research. A married member pleads that pupil nurses shall be given more definite training in adapting themselves to family conditions.

XVIII. The last question asked for suggestions regarding possible improvements of conditions in the life and work of pupil nurses. Here again, a few are quite satisfied with things as they have been and some say all needed improvements have been made since their day. The following recommendations are given: First, shorter hours, mentioned 115 times; next, a larger social life to offset the narrowing influence of the purely professional life with outside interests such as music, lectures, current events (51). Next comes recreation and it is specifically mentioned several times that this should be in the open air and by one or two that it should be compulsory (14). Better food is mentioned 52 times and better housing 25 times. Several feel that there is room for improvement in the relation of Superintendent and pupils, recommending a more kindly attitude where the pupil is treated more like a person and less like a machine (20). One thinks the head nurses should be older and better supervision practised in the wards. Longer vacations are mentioned several times, also better teaching, more time to study and day classes only. One person recommends that pupil nurses should have occasional physical examinations as a safe-guard to health.

These are simply the surface gleanings from this group of replies. There is still a great deal of good grain to be sifted out, but it will take time and much study. The committee is very grateful to those who furnished the material and promises a fuller report later. It is believed that much of this data will prove to be valuable for our publicity work. As a picture of a happy, healthy, useful and fairly prosperous body of women, it would undoubtedly compare most favorably with any other occupation for women, and ought to prove a much needed stimulus to those timid ones who hesitate to venture in. It ought to encourage the hospitals too, for though there are many suggestions for improvement, there is also much appreciation for what has been done, and there is ample assurance that the satisfactions in nursing work are
still powerful enough to attract and keep many women who have 
had excellent educational advantages and who are otherwise con-
sidered highly desirable members of any profession.

Respectfully submitted,

ISABEL M. STEWART,
Chairman.

The President: This is one of the most interesting reports we 
have heard, and I wish that we might have had time to have 
Miss Van Blarcom read every word of it.

A motion by Miss Goodrich, seconded by Miss Sutherland, that 
the report of the Vocational Guidance Committee be accepted, 
was unanimously carried.

Miss Riddle stated that she was not prepared to give any re­
port on Hospital Administration.

The President: Miss Goodrich, will read the report of Miss 
Greener, Chairman of the Committee on the Revision of the Con­
stitution and By-laws.

REPORT OF THE COMMITTEE ON THE REVISION OF 
CONSTITUTION AND BY-LAWS

The Committee has held two meetings to consider the revision 
of the Constitution and By-Laws, in accordance with the sugge­s­
tions presented at the Twentieth Annual Convention in St. Louis 
in 1914. After a careful consideration of the proposed revisions 
it was determined to delay the amendments for another year, for 
the following reasons:

First. After two years' experience with the present consti­
tution and by-laws, it was found that while the provisions in the 
main are good, there are numerous amendments that should be 
made in order that the constitution and by-laws shall be in 
accordance with the corporation laws of the State of New York;
and to provide for sundry omissions. As an example of the re­
quired changes I beg to call your attention to Section 2, Article 
4 in the corporation laws of the state of New York, which reads 
as follows:

Section 2: State leagues if qualified as specified in by-laws and ac­
ceptable to the society. Such organizations to be entitled to one delegate 
in addition to the president, and one vote.
Article 1 of the by-laws provides that meetings of the society shall be held annually. According to the corporate laws of the state of New York the meetings of an association must be held in the state. This word must therefore be changed to "Convention." There are numerous other changes of a similar nature that will have to be made.

Second. It was also found that changes had to be made in the constitution and by-laws of the American Nurses Association, and your committee, therefore, deemed it wise to defer the work of our own constitution and by-laws another year rather than make amendments that would not strictly accord with the constitution and by-laws of the American Nurses Association.

Third. and most important reason for delaying the changes arose from the fact that the provisions made for representation on the Board of Directors and Executive Committee of the American Nurses Association for national organization was found to be incompatible with the corporation laws of the state of New York; and since it was felt that the affiliation could serve its highest purpose only through such representation, your committee felt that some plan must be devised whereby this association should either have very definite recognition in the American Nurses Association, or that the national organizations should come together in a representative council.

To this end the committee consulted the lawyer who has advised on our journal matters, and in the revision of the constitution and by-laws of the American Nurses Association. I beg to submit his opinion as presented in the following letter:

My dear Miss Greener:

Answering your inquiry as to the representation of the National League of Nursing Education in the business affairs of the American Nurses' Association, if the latter amends its by-laws so as to provide for a system of representation by delegates as set forth in my letter to Miss Sly of April 9, 1915, I wish to state that the American Nurses' Association could provide in its by-laws for the National League of Nursing Education being a separate and distinct district, and that as such it could be entitled to as many delegates as there are members in the National League of Nursing Education who are members of the American Nurses' Association.

Trusting this answers your inquiry, I am

Sincerely yours,

It is obvious that no provision for either suggestion could be made in the constitution and by-laws of the National League of Nursing Education until a conference with our associations had been held and some mutual agreement reached.

Your Committee, therefore, respectfully suggests that the revision of the constitution and by-laws be referred back to the committee, and that this committee be authorized to act in conjunction with the committees appointed to take up this question from the American Nurses Association and the National Organization of Public Health Nursing.

Respectfully submitted:

ELIZABETH GREENER,
Chairman.

A motion by Miss Hilliard, seconded by Miss Lawson, that the report of the Committee on Revision of the Constitution and By-laws be accepted, was unanimously carried.

The President: There is a definite suggestion in that report which I will just ask Miss Goodrich to read again, because we must act upon it formally.

Miss Goodrich: (Reads last clause).

A motion by Miss Lawson, seconded by Miss Cole, that the revision of the constitution and by-laws be referred back to the committee for further study and special conference with committees appointed from the two other organizations, was unanimously carried.

Miss Goodrich: I think that you will understand that we really can do very little about the Isabel Hampton Robb incorporation until we have revised our constitution and by-laws to accord with the American Nurses Association and the National Organization for Public Health Nursing. If a council were formed, of the three associations, all mutually interested in the relief fund and in these questions of education and nursing activities—it would seem to be an excellent way to come together. If we can do this, our three committees on constitution and by-laws can provide that the by-laws of each organization will accord with the provisions of the Corporation Laws of the state in which it is incorporated, so that we shall act in harmony with each other. Therefore, at a meeting of the committee of the Memorial Fund
last night, we determined to do nothing until this committee on constitution and by-laws had some proposition to suggest.

_The President:_ I would like to say in addition that when we formed the affiliation three years ago and worked so hard upon this constitution and by-laws, we thought we had effected this close relationship and opportunity for cooperation between the three organizations. Now we find that there cannot be any representation upon the board of the American Nurses Association by the presidents of the other two organizations; it is incompatible with the Corporation Laws of the State of New York which definitely state that the personnel of a Board of Directors cannot be set forth by any organization, that is, the delegates must have the opportunity to vote upon their own ticket. The suggestion regarding the Council was in order to continue the opportunity for co-operation and affiliation that is so important, in order to advance the interests of the entire nursing profession, no matter what organization it may be. We are all members of the American Nurses Association, all working for some particular object, and, therefore, the conference between the three committees we feel will lead to some definite plan that will accomplish this ultimately.

**REPORT OF STATE LEAGUES**

We will now have the reports of the delegates, who are Presidents of the State Associations. It is only three years since the National League began to organize the State Leagues of Nursing Education. Last year we had only four state organizations, this year we have thirteen. Now, this is really a very splendid increase. Next year we hope to be able to report twenty-four, if not more. If we can only have our state leagues well organized, and if the state leagues will only see that local leagues in their states are organized, we shall have an opportunity of reaching every part of the country, no matter what we wish to bring before our body, just as the American Medical Association reaches out through its state and county associations. Will the Presidents of the various State Leagues give us briefly a few words concerning the work done in their respective states.

_Miss Hutchisson (of Arkansas):_ Our president is not here this morning; she did not know that she would be expected to give a
report. We are just one year old and have had two meetings during the year. There are fifteen members. We have three county associations who are members. Miss Tye is our President, and Miss Riley is Secretary.

Miss Dubois (of the District of Columbia): Mrs. Higbee, who is superintendent of navy nurses, is President of the organization. It is a very active organization. We have about twenty-five in attendance ordinarily, and we meet every month. We have had some very interesting discussions this winter on the subject of cooperation between the superintendents in the District. There was a very interesting, well-balanced paper read on the subject of the proper diet for pupil nurses and discipline in the training school. I remember one superintendent was very much interested in the discussion of cooperation between superintendents in the matter of dismissed nurses. She said she had dismissed several nurses who had been later accepted in other training schools, and she thought there should be better cooperation between schools because these nurses invariably failed in the end. I am just a nurse in the navy, a member of the organization and a delegate.

The President: We are exceedingly grateful to you for rising in response without preparation.

Miss Mary Stewart (of Illinois): We have had 27 new members, 4 regular and 2 special meetings, one meeting held at the State Capitol at Springfield in conjunction with the State Association of Graduate Nurses where Dr. Dearholt of Wisconsin gave an address on the Standardization of Training School Requirements. This meeting was largely attended and resulted in many down-state members joining the organization.

The League has established a Lecture Bureau where a selected number of speakers on nursing topics may be secured free of charge.

A subject of great concern at present in the Middle West is the inability of nursing bodies to comply with requests from the Women's Trade Union Leagues for endorsement of minimum working hours for women. While we are convinced that this is a splendid humanitarian step, as nurses we feel that it would work great hardship to the sick, were this legislation passed while nurses are still included in the labor class. Our position in this
matter counts much for or against the movement for the reduction of hours of working women and we feel that an explanation is due the Women's Trade Union League showing why we take the stand we do. They should also be assured of our support just as soon as the nursing profession shall be placed under the Bureau of Education and not the Bureau of Labor.

To this end the Illinois League has sent a communication to the Executive Board of the National League asking that some consideration be given to this important matter during the Conference at San Francisco feeling sure that this discussion will relieve us of much criticism regarding our stand in refusing to endorse the legislation of the Women's Trade Union League for shorter working hours.

The Illinois League also recommends that all state and local leagues carry out for the coming year some special line of work recommended by the National League so that each group may work uniformly.

Miss Parsons (of Massachusetts): The Massachusetts League this year has begun to do definite work, but there has not been sufficient accomplished to make a long report. The superintendents of the training schools in all hospitals, large and small, are showing great interest in trying to arrive at something like a uniform curriculum that shall conform at least to the minimum standards that the National organization recognizes. They are anxious to shorten hours and improve conditions in Massachusetts and the state league went on record as favoring a fifty-six-hour week which should include classes and lectures. That is a dream as yet, but we hope to make it a reality. I think perhaps that is the most important step that we have taken. I want to give credit to the graduates of Teachers' College who are working with the Massachusetts League. We have several who have taken at least a year, some who have had two years and some who have only taken the summer course at Teachers' College, and they all come back to Massachusetts full of enthusiasm and are doing definitely progressive work along educational lines. The Collegiate Committee work was done through one of our members, Miss Watson, who is a graduate of the two-years course of Teachers' College, also a graduate of Mount Holyoke College and of Newton Hospital for Nurses. She has done perfectly splendid
work in the presentation of Nursing before college women and college preparatory schools.

Miss Nash (of Maryland): The state of Maryland did not prepare a report. The League is two years old and has twenty-five members. Meetings are held monthly from November until May. We have worked in connection with the State Board of Examiners and with the departments of public health work to get a uniform curriculum in all the schools.

Miss Bamler (of New York): There are two classes of membership, individual and organization. We have about 75 individual members and 5 organizations, that is, New York City League, Brooklyn League, Hudson Valley League, Monroe County League and Buffalo League. We hold one annual meeting and two regular meetings of the executive committee, with special meetings of that committee as found necessary. There are two more Leagues forming, the Westchester County and Southwestern New York. The dues are only fifty cents per year, and we find that entirely inadequate for any educational work. We hope before long to be able to revise our Constitution and By-laws so that we can have a larger amount of dues and be able to do a greater amount of work. The New York State League, in fact, I think all the leagues, have worked more or less during the year on a standard curriculum. One of the features of the meetings of the Buffalo League is a question box. The New York City League holds monthly meetings which as a rule are well attended and very interesting. One feature is a round table session previous to the general meeting, for each special interest represented in the League, that is, for instructors, public health nurses and those in hospital or training school administration.

The President: I would like to say a word about organization as a member of the New York State League, which was the first organized. The same form of organization exists there as we had hoped to see in the national body. This state league is made up of local leagues, the presidents of these local leagues are on the Executive Committee of the State League; that makes it possible you see, through the Presidents of the State Leagues who are members of the council of the National League, to get into communication with every little local league through its President. This is the way we hope all the other State Leagues will organ-
ize, as it brings them in line with the organization plan of the National League. I am sure that the New York City League would be very glad to send its constitution and by-laws and the New York State League also to any other state who might care to apply for them.

Miss Lawson (of Ohio): Miss Samuels is President of our League. She has not sent any report, merely a letter asking me to act for her. I am somewhat familiar with the work of the League, however. Our dues are only twenty-five cents; paid into the general treasury. All of the officers of the State Association are members of the League, and we aim to have our meetings at the same time, and any expense borne by those members are paid out of the state treasury. This year, as you perhaps know, we have been very busy in securing our bill for registration, which was signed by the Governor on the 3d day of May. It is about all of the work that has been done by the League. We have had, since our annual meeting in October, one special meeting of the League, but various members of the League have met at various and sundry times in Columbus with reference to the work on our bill. The Ohio League has a membership of between 30 and 40; practically every hospital superintendent in the state is a member or has an application in for membership. We have also done some work on a uniform curriculum.

Miss Clelland (of Rhode Island): We have been organized for three years and have an active membership of 22. We meet every two months and take up topics of interest to nurses and at different times have speakers from the outside. Some of the subjects discussed last year were, student government, state registration, standards of training schools, all of which we found helpful.

Miss Coleman (of Michigan): The Michigan State League has been organized two years and we have held our second annual meeting. Our membership is 48, I think. Besides the general co-operation in the work being carried on by the State Nurses' Association, we have appointed a special committee to consider the question of credits and affiliation, working in co-operation with the State Board of Registration. We also have a publicity Committee which has presented its report to the Secretary of the National Organization. Another Committee has been at
work on the question of extension work in the University of
Michigan. Our meeting this year was held at Ann Arbor in con-
junction with the annual meeting of the State Association, which
we feel has aroused a great deal of local and general interest. One
feature of our program at the annual meeting this year was a
session given over to practical demonstrations, performed by the
nurses from the different hospitals of the state, the Fort Huron,
Grand Rapids, Babies' Milk Fund of Detroit, the Battle Creek
Sanitarium and the University of Michigan Hospital. We had
the preparation of a babies' milk formula, a bed foot-bath and
hair shampoo, the application of a box extension and fire drill,
preparation for operation in a private home, practical medical
asepsis in the care of contagious diseases, and the hot pack to a
bed patient. All of these demonstrations were given by the
graduates of these schools with the exception of two given by
nurses in training. We also had a display of charts, records,
text-books, uniforms, operating-table pads, surgical supplies,
teaching equipment and many other things. The nurses were
very enthusiastic over this department.

_The President:_ The purpose of these reports is to let all know
what the State Leagues and Local Leagues are doing so that we
may work out in a more uniform way the purposes for which the
League exists. This purpose is educational, and we are anxious
to reach the training schools, the instructors in the training schools
and the heads of all schools. We fell that the strength of our or-
ganization lies in the individual pupil in the training school and
the superintendents of training schools who have the responsi-
bility of preparing the nurses for future work. There is no more
important position to my way of thinking than that of superin-
tendent of a training school and no obligation greater. The re-
port of the Nominating Committee is now in order. Miss McMil-
lan is Chairman of this Committee. The report will be read by
Miss Parsons.

_Miss Parsons:_ The following officers are nominated for the
year 1915–1916:

President—Miss Clara D. Noyes, New York City.
First Vice-President—Miss Sara E. Parsons, Boston.
Second Vice-President—Miss Mary C. Wheeler, Chicago.
Secretary—Miss Isabel M. Stewart, Teachers' College, New
York City.
Treasurer—Miss Mary W. McKenzie, Baltimore Md.
Auditor—Miss Julia Stimson, St. Louis, Mo.
For the Executive Committee—Miss Menia S. Tye, Ft. Smith, Ark., Miss Harriet Fulmer, Chicago.
Names may be stricken off this ticket or additions made if so desired.
Respectfully submitted by the Nominating Committee:

ELSIE M. LAWLER, Baltimore,
MARGARET A. DUNLOP, Philadelphia,
M. H. Mc MILLAN, Chicago, Chairman.

The President: If there are any nominations they may be made at this time from the floor. I would like to say that the list is posted and the voting takes place at the last session. We are ready for nominations from the floor.

No nominations being offered, a motion by Miss Hilliard, seconded by Miss Cadmus, that the report of the committee be accepted, was unanimously carried.

The President announced that there would be a meeting of the American Hospital Association at the Inside Inn, June 22, at 2.30 p.m., and there would be a paper on the program dealing with the Eight Hour Law. Miss Jammé was asked for further information.

Miss Jammé: My paper is on the effect of registration upon the Training Schools for Nurses in California. We feel that the Eight-Hour Law and the Registration Law have worked together. I was asked by the Hospital Association to present a paper on the Eight-Hour Law and I felt that this could not be done without including a discussion of Registration. The Registration Law is under the State Board of Health and the Eight-Hour Law is under the Bureau of Labor Statistics.

The President: I think as many as possible should attend that meeting, because this question of a 56-hour week or eight-hour law is one that we should discuss in all states at the present time.

Miss Parsons: Miss M. E. P. Davis, a graduate of the Massachusetts Hospital, was elected by the Massachusetts State Nurses’ Association to represent them at the convention here, and the Massachusetts General Alumni also asked her to represent them at the American Association meeting. She has been
one of our very active members, and I know you will all hear with regret that she was taken sick on the trip and is now in the hospital, very ill with pneumonia. I would like to move that we send her our expression of great sympathy and regret that she cannot be with us at these meetings, with a hope for her speedy recovery.

The President: May I ask that some flowers go with the message to her.

Motion duly seconded and unanimously carried.

Upon motion, duly seconded, meeting adjourned.

Tuesday, June 22, 1915

CONFERENCE ON TRAINING SCHOOL PROBLEMS

The President, Miss Noyes, Chairman

Meeting called to order at 11 a.m.

Miss Jammé: I would like to make an announcement concerning the exhibit which is on the table at the side of the room. It is the material that has been sent in from the different states and all data concerning the machinery of administration. This has been gathered at a great deal of trouble by Miss Sutherland of the Hartford Hospital. It is hoped this will become in time a permanent exhibit, and we will ask that the nurses looking over it will be as careful of it as possible in order that it can be sent to what we hope will be our permanent headquarters.

The President: I hope as many as are interested will take advantage of the exhibit; it is exceedingly interesting and very carefully prepared. We have a little unfinished business left over from yesterday and we will get through with it as quickly as possible, because we have several very interesting papers. We will first call for the report of the Education Committee, to be read by Miss Riddle.

REPORT OF THE COMMITTEE ON EDUCATION

At the last meeting of this Association the Committee on Education presented a preliminary report on a standard curriculum for use in schools of nursing. This report took up in outline the
main features which should be considered in the construction of such a curriculum, such as entrance standards, length of course, the relation of theory to practice, hours of work, the length of time required in various services, elective courses, hospital facilities and teaching equipment, numbers and kinds of instructors and certain important factors in administration of school and hospital. These features, and others relating directly or indirectly to the curriculum, were discussed in considerable detail at the meeting, as the recently published transactions show. During the year the committee framed a careful outline which included every point raised in the development of the curriculum, and mailed this with a letter to each member of this Association, in order that the opinions might be secured not only of those members present at the meeting in St. Louis, but of those who could not be present, and whose opinions were equally desired. Upon the basis of the ample discussions and comment at the meeting and of such detailed written criticisms, it was felt that we might proceed with final work on the curriculum, and at one time it was hoped that we might work rapidly enough to have it ready for distribution at this meeting. The slowness with which replies to our questions have come in (they are still coming in even at this hour) together with the enormous amount of careful and detailed work involved, and the heavy pressure of other duties under which the members of this committee are laboring, has put this entirely out of the question.

The greater part of the work, however, has been done, much of the material has been classified and tabulated, and the results will shortly be submitted to the committee for final revision. Many interesting and valuable suggestions have come in the correspondence of the past year which the committee has found helpful, and for which it acknowledges its indebtedness. The report will be printed as soon as it is possible to complete the required work, and the committee wishes to say again that it will be presented not with the idea that all schools can conform to it, for in the present state of nursing education that is clearly impracticable. The conditions differ so widely in the various schools throughout the country that it would not be possible at present, even if it were desirable, to present a curriculum which could be generally adopted. This should, however, be one step
forward in unifying the work in our schools of nursing and in setting up sound educational ideals.

Respectfully submitted,

M. A. Nutting,
Chairman Committee on Education.

The President: You probably remember very distinctly the discussion upon the curriculum last year, and you will recall the questionnaire that was sent out to the members during the year. We had expected to bring this up for further discussion at this meeting, but the questionnaire did away with the necessity for this. As this report states the results of last year’s conferences, and of the questionnaire, which was sent out to all members, will be put into the form possibly of a printed pamphlet, and sent out to the members of the Association; therefore, it is not necessary to bring the matter again before the Association for discussion.

A motion by Miss Hilliard, seconded by Miss Taylor, that the report of the Educational Committee be accepted, was unanimously carried.

The President: We have a further suggestion concerning the curriculum which seems to me so admirable that I am going to ask Miss Van Blarcom to give it to you, and then we will decide how this may be brought before the Educational Committee.

Miss Van Blarcom: My ideas on the subject mentioned are not clearly crystallized as yet, but such as they are have grown out of my experience as a superintendent of nurses trying to secure public health lectures for the pupils, and my work as secretary of an organization devoted largely to one phase of public education.

As to the superintendents of nurses—we are hoping that in time they may be able to include in their curricula instruction in at least some of the many aspects of public betterment and public health work. For example, tuberculosis; infant welfare, including pre-natal instruction, and milk stations; mental hygiene; prevention of blindness; social service; general visiting nursing, etc.

I can imagine that most superintendents in small or moderate sized towns, no matter how well meaning and enterprising, would
find it very difficult to secure lecturers on these subjects who could speak with authority and at the same time with enough force and enthusiasm to have the lecture represent something more than a very tiring and sleepy period for the pupil nurses.

It is very important for public health work in the future that the pupil nurses not only learn something of what is going on in the many fields open to them after graduation, but that they should have a very intelligent interest in these questions aroused during their training school days, and I am free to confess that I do not believe the average superintendent of nurses, excepting in a few of the large cities, could even approach the provision of such a course of public health lectures as we should like to have given to the pupil nurses.

On the other hand there exist national organizations which are devoted to the study of the subjects I have mentioned and many more besides, and among their important functions is the dissemination of information upon their respective problems. For example, the American Association for the Study and Prevention of Infant Mortality; the National Association for the Study and Prevention of Tuberculosis; the National Committee on Mental Hygiene; the National Committee for the Prevention of Blindness, etc.—I feel quite safe in saying that each one of these organizations would go to no little trouble for the sake of reaching the large body of pupil nurses in this country. They would consider of great value the opportunity of having a written lecture prepared to be given before classes of nurses.

Accordingly, I would suggest that some machinery be established whereby the national organizations engaged in various kinds of public health education be officially requested to have prepared simple, authoritative and interesting lectures to be sent to the superintendents of training schools upon request. And, moreover, that an understanding be reached whereby lantern slides could be sent to illustrate these lectures; and also some of the literature dealing with the subjects of the lectures in question. The superintendent of nurses could then, without any knowledge of the subject, give to her nurses—or a physician could give it should she wish it—a lecture which had come straight from headquarters and which could present none of the disadvantages of the talks so often given by those who are only in a position to
give half truths, and who through their lack of information, fail to leave with the nurses the very impressions it is so desirable to make.

Another point which is not unimportant is the fact that the various national organizations are often in touch with local workers of whom the superintendent of nurses would not necessarily have cognizance, and would accordingly be able to suggest to the superintendent a lecturer who could give a talk at first hand, if she preferred this to the so-called "canned" lecture.

In my judgment some such plan as I have outlined very generally would be of mutual advantage to the superintendents and the various national organizations doing public health work.

The President: We have heard this admirable suggestion. I know of no one better able to speak on this subject of public health work than Miss Van Blarcom. It seems to me a very practical suggestion. I presume that these pictures and lantern slides could be kept at some central place from which they could be distributed.

Miss Van Blarcom: It would be very simple to send requests for lantern slides, written lectures, etc., to be supplied by the various national organizations and treating of their respective subjects. It would seem wise, however, to have these requests emanate from some one source.

Miss Hill: Could not something definite about it be placed in the Journal?

The President: I think the first step would be to make the suggestion to the Educational Committee and let them work it out. If it were announced through the Journal that the superintendents of the small schools might secure lectures and lantern slides, the chances are they would read about it and forget it. They have got to be secured without much difficulty, but I believe it is perfectly practicable. Our alumnae associations all over the country have been urging lectures and the state leagues. Those who were trained some years ago did not hear very much about public health work in their class instruction or lectures and I think the graduates are just as much in need of it as the pupils. I would be very glad if someone would make a motion that this suggestion be put into shape and sent at once to the Education Committee so it could be incorporated in their report.
A motion by Miss Gibnet, seconded by Miss Lawson, that the suggestion as presented by Miss Van Blarcom be sent to the Education Committee to be put into definite shape and incorporated by them in their report, was unanimously carried.

The President: We will now have the report of the Publicity Committee, read by Miss Parsons.

REPORT OF THE PUBLICITY COMMITTEE

The presidents of the various State Associations were asked to help in the work of publicity concerning nursing education and nursing opportunities. It is now pretty generally acknowledged that back of the mismanaged schools and objections to professional nursing as an occupation, a cause may be found in the ignorance of the general public as to the opportunities now open to the well-educated woman with a nurses' training and the improvements in our schools, which are increasing with encouraging rapidity.

The responses were quite satisfactory and cordial, although I have not as complete a report from many states as I had hoped to obtain before the convention. Letters manifesting special interest and activity have come from Arkansas, Montana, Indiana, Iowa, New Jersey, New Hampshire, Nebraska, Michigan, Georgia and Massachusetts.

As much of the publicity work has been along the lines pursued by the Vocational Guidance and Collegiate Committee, I will not read these letters, although the one from Nebraska, written by Miss Carrie S. Louer is especially interesting and stimulating.

I will try as a special advocate of "legitimate publicity" to define what seems to me to be the distinctive duties of each of these committees. Obviously the Collegiate Committee has a large enough field when it confines itself to presenting the advantages of and opportunities in nursing work to college women.

The Vocational Guidance Committee needs to work with girls before they reach the stage of having chosen their future vocation. Miss Creech of New Jersey said their State Association had petitioned their Commissioner of Education to present to the grammar school girls the necessity of finishing at least one year of high school, if they wished to become trained nurses. The Vocational
Guidance Committee would also naturally ally itself with Vocational Guidance Bureaus, in order that teachers and all those who are preparing themselves to act as vocational advisers to girls should realize the requirements for and opportunities in the nursing profession.

In my opinion the Publicity Committee has a larger and a more fundamental duty to perform than either of the other committees and its work will greatly promote their efforts.

As Miss Stewart's paper disclosed, the greatest opposition to nursing as an occupation for the well-bred and well-educated girl comes from the parents and from parents whose ethical standards are high.

We are facing the fact that if we are to have any adequate number of suitable women in our schools we must make our schools the kind of institutions that will bear inspection. To do this, the people who manage and support hospitals must be educated as to the duty of the hospital to the school. We must also show the laity that our schools are improving and that the nursing profession has opportunities worthy of the best womanhood in our country.

Miss Martha Oaks of Iowa writes that she went before the Diocesan Convention and presented the importance of well-equipped training schools in connection with their hospitals and their obligations when assuming the responsibility of a hospital. She also observed that individual membership in city or other professional clubs was one of the best ways of bringing nursing work to the attention of other people.

Following are some definite suggestions for publicity work, which I hope may be extensively used in every part of our country.

Have graduating addresses given in a place where the general public can be invited and have the address given by persons with intelligent and progressive ideas concerning nursing education and its value.

Invite the press representatives and all members of hospital and training school boards, who are usually influential people in the community, as well as other representative people. Also invite these people to our County, State and National Conventions. Provide the secretary with lists. Nursing organizations should affiliate with other women's clubs and show a helpful spirit towards all activities for the public welfare.
Opportunities for presenting our problems before women's clubs and medical societies should be sought for and utilized. Articles should be written for newspapers and magazines and publication can be secured by interesting reporters and journalists.

Space should be secured in the school departments of newspapers for items concerning nursing schools. Our magazines should be placed in our public libraries and club reading rooms.

Our pupil nurses may help by writing articles concerning their life and work for their school and college magazines. We must not despise the use of photographs and illustrative material and we must show interest in other people and their activities, if we would enlist their interest and help in our problems. State Associations might pay someone to spend time to go about the state talking and writing.

The following suggestions made by Mrs. Hartridge of North Augusta, South Carolina, are worth quoting and can be developed considerably.

Have the National Committee secured the interest of some popular writer of current events, with the view of having him write for his special magazine a series of short sketches of our well-known nurses, who are conducting work along special lines; as for instance Miss Delano, Miss Hay, Miss Nutting, Miss Crandall, Miss Thompson and Mrs. Higbee. The sketch should include the personal as well as the public history of the subject and should be accompanied by a photograph in uniform.

Arouse interest in the personality of the nurse and her work through the medium of the high school graduate. Suggest to the State Associations that they have their chairman of arrangements issue personal invitations to the members of the graduating class of the various towns in which the annual meetings are held, that special badges be furnished and a member of the committee be instructed to look out for the wearers in the way of special seats and the pointing out of prominent nurses present. When the speakers are nurses, a little outline of the work they have been engaged in, should be given, and the papers explained when necessary. Any little personal touch that can be given, should be added, in order that the young women may not only learn of the breadth and aim and scope of the work, but have an interest in the personalities behind it.

Respectfully submitted,
SARA E. PARSONS, Chairman.

*Miss Parsons:* I think it would pay the State Associations to engage somebody who is interested in this publicity work and has
the ability to speak before the public, pay her the regular salary that she would get doing private nursing, and have her spend a few weeks in the year visiting the different parts of the state speaking before women’s clubs. If the women of the country, especially in those states where we have suffrage, should rise up and demand that our nurses’ schools should be what they ought to be and that nurses should have a legal status, I think there would be something great accomplished.

*The President:* You have heard this very excellent report. I want to call your attention to this reprint of an article by Miss Parsons, from the June issue of *Feminia*. It is called the “Lady with the Lamp.” Miss Parsons is so modest she didn’t want to say anything about it. It is really very readable and very entertaining, and puts the matter in a popular form without being the least bit “yellow.” It would be a very good article to circulate widely.

A motion by Miss Maxwell, seconded by Miss Cadmus, that the report of the Publicity Committee be accepted, was unanimously carried.

*The President:* It is usual at this time to appoint a Resolution Committee. I will ask Miss Sutherland to serve as chairman, Miss Hilliard and Miss Sherman completing the committee. The National Committee for the Prevention of Blindness has asked us to appoint one of our members as a representative on its advisory board, and I am sure you will be glad to know that we have asked Miss Pickhardt, Superintendent Pasadena Hospital, to represent us on this committee and she has kindly consented to do so. This is a new committee. They have decided that it would help their organization very much if they had a representative from every big national organization on their advisory council, and we are very glad to appoint a member from the League.

We will now hear a paper on “The Social Life of Student Nurses,” by Miss Mary Riddle of Newton Hospital, Newton, Massachusetts. I know of no one better prepared to speak on this subject. I know Miss Riddle has given careful thought and study to it, and the Newton Hospital has done more than any other school I know, to develop the social life of the pupil in the school. [Applause.]
THE SOCIAL LIFE OF STUDENT NURSES

With this country's great increase in the number of pupil nurses incident to the multiplication of hospitals and the larger demand upon the hospitals for the care of their patients, as well as the additional opportunities for nurses in the world outside, came the weighty impression that new paths must be blazed and new trails laid out for the future so full of demands and withheld so full of promise to the well-disciplined and well-equipped young nurse fortunate enough to have had her education in the times and under the auspices so favorable for her success.

It followed as a natural sequence that as the schools demanded pupil nurses in greater numbers they were obliged to admit them at an earlier age than hitherto or be willing to accept the older women who have been out of school a long time and who doubtless have tried some other occupation and possibly failed, or grown passé in it and who now turn to the profession of nursing as a safe harbor for their abilities and activities.

The younger women are the newly graduated school or college girls, many of whom are assuming responsibilities for the first time in their lives and these responsibilities are of a kind to wear heavily upon them. They must, therefore, not only be taught how to meet the cares of their newly chosen hospital work, but they must be carefully supervised regarding their own health and pleasures. Some of them, and these are often among the worthier and more useful ones, must even be taught how to take their places in the great world outside of schools and hospitals.

These conditions have caused the superintendent of the average school much concern. She has weighed the matter in her own mind for a long time and has drawn her conclusions and acted according to the requirements of her special school and her means of meeting them.

After much deliberation, one superintendent of a training school determined to present the necessities to her board of trustees. Being wise men their perception of the whole situation was clear and their belief in the feasibility of a scheme for bettering conditions was at once expressed.

Her plea to them ran something like this: "We have many young nurses (some not over twenty years of age) who have come
from good homes, perhaps in the country, most of them are high school graduates, some are college bred, but very many have no particular point of view. They are sent to duty in the wards and they go and come faithfully, but when they are off duty they choose their associates, sometimes with little discretion or else they mope and dull their wits and sensibilities by so doing. They go out without advice, they come in without comment from any one and without exciting the interest of any one unless perchance they are later than the prescribed hour.

"The nurses' school should have at the head of its home, a young woman, preferably one who is not a nurse, but who is well educated, alert, quick, bright and in sympathy with younger women and their interests. In short, she must be a woman of high ideals and one whom the nurses will delight to follow. She should direct their pleasures and guide them in hygienic ways for their health's sake; she should direct them to places of interest when off duty and if need be, chaperon them; she should see that they are provided with suitable and interesting reading and recreation in their home; she should teach them how to meet people in a social as well as a business way; she must keep them in touch with the world outside of the nursing life, and she should be at all times one of their most valued friends.

"Gentlemen, the need is great, does this appeal to you?"

"It does," was the reply, "but the hospital's finances are limited; how shall we meet this new demand upon our treasury?"

That superintendent was not a financier and could not answer, but upon the board were those of wide vision and broad minds, who delight in solving intricate problems as well as in doing good. One of these members arose and said, "I will finance this scheme for one year, if the hospital will signify its willingness to take it over at the end of that time provided it is a success, and we have proved its usefulness to our particular school."

This was the sanction needed, the plans seemed destined to be immediately realized and the next step was taken which was to secure the proper young woman to bring about the desired results. For the want of a better title she was called the Physical and Social Director of the Training School. The superintendent had no particular directions to give; she could only state what she wished to accomplish.
The young woman who undertook to initiate the work proved exceptional. She was a graduate of a college and had five or six years' experience as teacher in a private high school where she directed all the girls' activities. She had no precedents from which to take a cue and she had no prejudices to overcome. During the first year she kept constantly before her the goal and with eyes fixed upon it she started the work, having been given unusual freedom for it and support in inaugurating it.

Her very first act was that of making the home attractive by placing flowers about in unusual places and thus exciting the attention of the nurses. So successful did this prove that she continued it until every plant and shrub in the garden was covered with snow and she was obliged to fill her vases with pine branches from the nearby woods and boughs from the cedar trees, but she understood her young women and they were impressed.

She overhauled the library and by means of a new arrangement of the books upon the shelves and a new catalogue she directed attention to them and then by her own knowledge of them and the very interesting manner in which she imparted it, her young women were won from another standpoint and of their own volition patronized the reference library as never before.

As the Home library was rather meager she conceived the idea of increasing it by cooperating with the public library in the city. Because of the interest of the hospital trustees in the school and because many of the same men were trustees of the public library she had the Nurses' Home made a sub-station of the public library which delivers one hundred new books each month to the Home and removes the number left there the previous month.

A well-lighted and comfortably arranged reading room with current newspapers and periodicals was established and proved a very Mecca to the tired nurse on her return from the arduous work of the ward. A vesper hour for day nurses and a twenty-minute song service for the night nurses was held every Sunday evening. A few theatre parties and visits to places of interest were made, but much more dependence was placed upon resources in the Home and what could be brought in. Leaders in many lines of the world's work were welcomed to the Home and every one was generous in responding to a request for a talk about his or her special activity. Many came to entertain the
school in the happiest manner. Coöperation between the training school and other institutions of the city, such as schools and churches, was started and continues to grow with benefit to all by proving mutually educational. A student branch of the Young Women’s Christian Association was organized and accepted by the national organization. For this the nurses elect their officers each year and carry on its business according to the rules laid down by the national body. They also elect two of their members as delegates to the Y. W. C. A. student conference held annually. The school pays all expenses of these delegates and must earn money to do so. The superintendent of the training school stipulates that nurses acting as delegates must be willing to consider the time thus spent, a part of their vacations.

The clergymen of the local churches, officers of the Y. W. C. A. in the neighboring city, and nearby schools, colleges, members of mission boards, settlement workers and active christian men and women of many professions have graciously addressed the Sunday evening meetings and made of them a pleasure but never a duty in the thought of the nurses.

These meetings are supervised and partly arranged by the Physical and Social Director who knows that the Music Committee is doing its duty and that provision has been made for each part of the service which she then puts into the hands of the officers of the Y. W. C. A., it being considered good discipline for the nurses to conduct them and subject themselves to commendation or criticism as the case may be. The meetings are always attended by the officers of the school and not infrequently by members of the Training School Committee or Trustees.

The members and friends of the school felt that a long step forward had been taken when they were able to assemble the graduating class and pupils of the school in the Recreation Hall for the baccalaureate sermon which was delivered on the Sunday evening preceding the date of graduation. The participants took such a degree of pleasure and satisfaction in this event as they have seldom experienced in hospital work, not only on account of its immediate results, which were uplifting, but also because it marked a general advancement of standards.

Outdoor sports form an important feature in this scheme and every inducement to a healthy outdoor life was offered in tennis,
basketball, archery, a skating rink and a toboggan slide. Almost every other exercise is optional with the nurse and pains are taken to entice her out of doors, but should she prove unwilling to go for pleasure she is shown her duty and told that she must spend a certain amount of time in the open air each day though she need not necessarily participate in the games and amusements furnished.

Particular attention was paid to the outdoor exercise of the night nurses, they being apparently a little less inclined to make the effort. Longer and shorter walks in the country were taken and they sent the nurses back to their patients renewed in body and spirit. Tennis tournaments were held and friendly class rivalry ran high.

A club for each class met twice a month from October to April, for amusement or education. The Seniors called theirs the Current Events Club and arranged their programme to bring in their title at every meeting when they almost always added a short story. The stories were standard and their selection must have cost some one considerable thought. The club meetings were scheduled for the evening of the day when the pupils had their hardest class work of the week. One of their number was appointed to lead in the recitation of current events and one to read the short story while the others sat about with their sewing or other hand work and were entertained.

The Juniors called their club the Book-Lovers’ Club and carried it on very much as that already described, while the first year nurses chose to study the art and history of dancing. Folk dancing was much appreciated as well as the social dances and the occasional dancing party. An hour in breathing exercises and tone production was given once a week in each class for general culture of the speaking voice.

Besides the clubs and classes the school was entertained fortnightly by one of the classes in some simple way, the hostesses for the occasion being chosen by the class. These entertainments were thought to be most beneficial because the hostesses were put upon their mettle to entertain in a pleasing and acceptable manner at little or no cost.

Thus is outlined the activities for the first year under the Physical and Social Director. It does not by any means give an ade-
quate idea of all that was accomplished, but it tells of the purposes and plans with something of their success when practically applied. The results were especially seen in a better school spirit which became loyal to the point of inspiration.

Instead of the school family being merely a working organization it became one united in its pleasures and enterprises as well, with a drawing together almost equal to that of the real family. Nurses became better acquainted and found sympathy which they gave in return.

Instead of having to be urged to take exercise in the open air, the nurses looked forward to it and found changing a costume for the purpose no hardship whatever. The increase in outdoor exercise promoted the health of the school to an appreciable extent and therefore the happiness and efficiency of each nurse.

Hitherto the members of the school found it necessary to leave the premises for pleasure and diversion, but with the opportunities at home the desire for entertainment elsewhere seemed to lessen and the permission for absence after the prescribed hour were less frequently requested.

There can be no doubt of the usefulness of this kind of work in our nurses' schools for the cultivation of the qualities of the nurse which have heretofore been allowed to lie dormant and which add so much to her success if cultivated, whereas, the want of their cultivation at least retards her progress and may bring criticism and even contumely upon the whole profession.

Who, among the officers of our schools, cannot recall instances of woeful ignorance of the common forms of living in the households of refined and well-to-do families? A young nurse launched into one of these homes is often so overcome and awed by, what seems to her, great splendor that she is unfitted for her nursing tasks. She has never seen some of the forms and ceremonies commonly observed. At home candles were long ago relegated to the attic and she is perhaps surprised to find them upon the dining table of the patient's family. She goes with the family to the library for the after-dinner coffee and forgets her patient until reminded by some member of the family that now perhaps her patient may require her care.

The personal experience the nurse gains in acting as hostess to the school at a little party does much toward enabling her to gain
the poise so necessary to qualify her for after occasions when she comes in contact with conditions of the same character, but on a larger scale. There should be no criticism of her because she does not know, for many of the conditions are not altogether worth knowing—but criticism may rightly come when she cannot maintain herself in their midst.

Again, it is a subject of remark that the nurse is too often ignorant of common characters in history or even in her profession. She may be forgiven for not knowing George Washington or Abraham Lincoln, but how can ignorance of Florence Nightingale or Mrs. Robb or Linda Richards be overlooked. Equally vague are the notions about more recent affairs in her own profession. She may know about a district nursing association, but she has not yet come into knowledge of the great body of public health nurses. She may know something of the various state associations for nurses—she may belong to the one in her own state, but she has confused it with registration and reasons that now since state registration is secured, its function should cease. When asked to become a member of her alumnae association, she may reply upon having it explained to her—"I do not see much in it for me."

These are all straws but they show that the wind stirring them comes from the arid desert of ignorance and narrow-mindedness and confirm with renewed strength the principle that our pupils must have a foundation of good breeding and fair education.

Busy nurse teachers may teach and almost drill their pupils in the subject of ethics and etiquette, but when the instruction comes from an outsider with that outsider's point of view and knowledge, the impression received is doubled in force and longevity.

Besides, many of our best training school superintendents have been long in the service and have rather lost the impulse they once obtained from sharp competition in the world outside, hence this new and one might almost say, alien spirit, stimulates every other kind of activity in the school.

Arguments almost innumerable might be cited for the necessity of such care and instruction, but let it be assumed that they have all been satisfactorily answered and let the attention be directed toward securing the proper young woman for this leader and instructor.
She would better not be a nurse because even if she were well fitted otherwise, it would be very hard for her to get away from the viewpoint and tendencies of the nursing side of the question, whereas, if she is unacquainted with that form of work in the school she will make no concessions to it in the outline and general management of her instruction.

As has before been said, she must be a woman of ideals and one whom the nurses will gladly follow, for no matter what her qualities may be she must have that within her which they consider worthy of emulation or she cannot exercise the drawing necessary to ensure success.

She must be a woman of education and she will do better to have had experience in association with young people and be willing to consider them her associates and comrades. To that end she will doubtless plan her absence from the home for the time when they also are absent on duty and be there when they are off duty and require her presence. She will have many discouragements; the nurses will not in the beginning look upon her advances with favor but will consider them as demands for more of their time and energy. If she is wise she will proceed slowly from one point to another in the establishment of clubs, etc.

The irregularities of the nurses will have a tendency to discourage her also—it will seem hard to have her plans interfered with by changes of nurses, by new assignments, in short, by the fact often reiterated that they are here today and elsewhere tomorrow—but her very discouragements may prove a benefit to them in that it draws attention to irregularities and changes which need not always be, but which may often be eliminated by a little more care and thoughtfulness on the part of the management.

She will discover many inequalities in the people proving them to be not of one class or grade, even though nominally in the same class in the school. Such discoveries may wound the pride of the management but they react to the advantage of all. The failure of the whole scheme is assured unless she can be given great scope for the work. The superintendent of the school must recognize the fact that the physical and social director must be allowed to work according to her own programme—that she must be given time for it and the opportunity for doing it in her own way. The superintendent may keep her finger upon the pulse of pro-
ceedings and it should be her privilege to demand results, but she must be willing to delegate her authority to one who must, necessarily, be a vital influence in her school, remembering that her own influence ought not to exist merely by reason of her position but by her inherent qualities as well. Naturally, there will arise great differences of opinion which usually result in mutual stimulation and are a good.

The whole work is large and complex and demands the surrender of many positions heretofore taken by the superintendent; it demands the coöperation of the nurses themselves; and it demands the assumption of new duties, new positions and new responsibilities by the physical and social director, but the single desire should be to give each individual nurse health and joy in her present duties, with a sense of security in her preparedness for the future.

The President: I am sure you must feel an embarrassment of riches in the way of suggestions from this paper. I will give about five minutes for discussion on it. I am certain that almost everyone here might add valuable suggestions, because each school, I am sure, has developed some particular way in which the social life of its pupil nurses might be improved. I would like to say in regard to acquainting the pupils with the conspicuous characters in nursing work, that I think this is one of the most valuable things we can do for the pupils. I have been in the habit, during the preliminary course, of having a weekly character sketch prepared by the probationers, giving them as a subject one of the conspicuous characters in the nursing world at the present time. I feel that none of our young pupils should finish their preliminary course without knowing Isabel Hampton Robb, Lavina Dock, Jane Delano and Linda Richards; and I do not confine myself entirely to the present; I also take up Sister Dora, Florence Nightingale and various others. I think that is a very valuable part of our preliminary teaching.

Miss Parsons: I would like to say that in our school we do not have a social director, and the nurses depend upon themselves for their social activities. It is sometimes hard in an extremely large school to hold the different groups together and maintain the interest of the school as a whole. Where there are
150 or 160 pupils, we find that some common object helps to accomplish this. Recently, when we wanted to have a party, it was decided to make it a financial effort to some extent, and we gave the proceeds toward the Belgium-American Hospital and toward furnishings for the new Home, so that every member in the school became interested, and one thing which I think worthy of mention in this very successful effort, which netted $125, was the decorative scheme. I was surprised at the ingenuity that the committee exercised. They wanted to use the basement of the Home for refreshments and cards, and we have in that basement a great many pipes going up and down the walls and across the ceiling. In one room there were a great many interlacing pipes. The pupils made a network of twine, and having collected pine branches, they laid these over so that the green fell through; they wound the pipes and pillars that went up and down the room with evergreen, and the fragrance of that canopy of green was like a pine forest. In another room where they had some of these same conditions to meet they made hundreds and hundreds of tissue paper butterflies, green, pink, lavender and white, strung them on white thread and fastened them over all the pipes so as you entered the room it looked as if the top of the room was alive with butterflies. I think it was one of the prettiest things I ever saw, and they had the whole place equally attractive.

Miss Shellberger: I have been very much delighted to find how my pupils have responded when given papers to write. We gave out subjects—state registration, the local association, the Red Cross and different subjects. Our pupils were very enthusiastic over the matter, and after a few weeks' preparation we had the papers read, allowing the students to select their own judges as to the merits of these papers. We find they are very anxious to do the thing again. Being given the subject, they then use our reference library and many also go to the public library to find material.

The President: The next paper, “The Planning and Furnishing of Classrooms,” was prepared by Miss Elsa Maurer, and will be read by Miss Taylor. There is an exhibit upstairs in connection with this paper, containing plans for class rooms, demonstration rooms and also lists of the equipment that is used at Bellevue. This exhibit was prepared by the pupils of Teachers' Col-
college. Three of the plans, which were part of the pupil's work in the House Planning course, were so exceedingly good that I thought they might well come out here as a suggestion of what really good teaching equipment should be in the training school for nurses. Miss Fleming's plan I particularly commend. One plan was drawn by a man and not a nurse. I would like to explain that Miss Maurer is a senior student from Teachers' College in residence at Bellevue, not a paid instructor. We have an arrangement with Teachers' College whereby we have three of their senior pupils living with us in return for maintenance. They give us a definite number of hours each week in teaching, either practical or theoretical, as the case may be, so that we are able to plan and carry out a great deal of class work that we would otherwise have difficulty in covering.

THE PLANNING AND EQUIPMENT OF CLASS AND LECTURE ROOMS

The ideal place for the class and lecture rooms necessary for a school of nursing, is in a separate building where all the rooms for instruction can be grouped together to the best advantage, uninfluenced by the demands of hospital or dormitory. At present there are no schools of nursing in this country that have been able to make such an arrangement and it is probable that for some time to come these rooms will remain in either the hospital or nurses' dormitory.

There are several advantages in having the class rooms in the hospital; first, the bulk of supplies must be obtained from the hospital and it is economical and convenient to have them near at hand. Then the probationers in the preliminary course obtain some realization of hospital environment before beginning their experience in actual ward work, and finally the atmosphere of the dormitory is more likely to be one of "off duty" and rest and relaxation, where there is not the restraint that often comes from having class and lecture rooms in close proximity.

Outweighing these considerations, however, is the great difficulty encountered in the actual practice of securing an adequate number of rooms with good light and ventilation, and in preventing the hospital from encroaching upon them. For this rea-
son it seems desirable to make provision for the class rooms in the dormitory.

It is important that certain points should be remembered in planning and equipping any or all of the rooms for instruction, such as:

(a) Location away from noise of street traffic.
(b) Good ventilation and lighting. Light should come in from the side.
(c) Comfortable chairs with an arm rest for pad or note-book.
(d) Nine square feet for each person is considered ample in figuring seating capacity. Rooms large enough to accommodate all the pupils in one class makes for a saving of time that would otherwise in some cases be used in repetition.
(e) The placing of the equipment in its relationship, that all may be easily accessible for pupil and instructor, that the maximum amount of work may be carried out in the minimum amount of time.
(f) Dimensions are of great importance. Much fatigue is avoided by having the table and chairs of proper height. A height of 32 inches to 34 inches for the table is maximum, with depth of 24 inches, while 30 inches to each pupil allows good working space.
(g) A good supply of shelves, cupboard room and drawers, adds much to the convenience of the instructor and pupils.
(h) Blackboard space. It is not enough to plan a few square feet back of the instructor's desk, she can use to a good advantage a great deal more, and at least one wall of the class room should be given up to blackboard for the pupils.
(i) An office for the instructor. This is indeed a necessity. The Superintendent's office cannot be used for this purpose. In an office of her own the instructor can carry on the preparation for class work, and can be consulted by the pupils at regular office hours, otherwise it often means that she is obliged to see pupils in her own bedroom where she is interrupted at any time.

There is probably as yet no nursing school where the facilities for teaching are entirely adequate; but I will describe briefly the arrangements in one large school with which I am most familiar. Having taught in these rooms I am better able to point out the advantages and limitations in their arrangements.
The Bellevue School of Nursing (New York City), provides instruction for 155 pupils. These rooms are all in the nurses dormitory and are as follows: ground floor, reference library; first floor, lecture and assembly room and reading room; second floor, science laboratory, cooking laboratory and demonstration room.

The lecture room is a light and well-ventilated room, of about 30 feet by 50 feet. This room gives seating capacity for the entire school as well as much larger gatherings, and is supplied with chairs having an arm rest. For this room the amphitheatre arrangement would be better, as it gives each pupil an equal opportunity to see the speaker. It would be a good plan also to have a curtain for lantern pictures here, and in the rear of the room a special electrical connection for the lantern.

The reading room adjoins the lecture room and is about 16 feet by 30 feet. The length of one side is lined with bookcases. There are two large mahogany tables in the center of the room and the room is well supplied with very comfortable chairs.

A temporary provision has been made for the reference library on the ground floor adjoining the main office. This room contains only reference books, and is provided with a table of good size and chairs. It is used entirely for reference work.

The cooking laboratory is a room 17 feet by 33 feet and is above the main kitchen. It is equipped to the best advantage for a room of its size and accommodates a class of twelve. A larger room would save repetition of classes. The floor is of red tile, and the wall back of the sinks is of marble for the height of 5 feet. There are two tables 19 feet 6 inches long by 2 feet 6 inches wide and 3 feet high arranged parallel with 2 feet of space between them. Three feet has been found to be a little too high for the tables, 32 inches to 34 inches being a better height. They are covered with slate, and the gas pipes for the individual gas stoves come up through the center. White enamel or tile would be an advantage over slate. For each pupil there are two large and two small drawers, with a cupboard below. There are two large sinks at the end of the room and other furnishings are a cupboard of good size, a china closet, refrigerator, range with oven and broiler, dumb-waiter connected with the kitchen below, a supply table which is also used by the instructor, a blackboard and stools for the pupils.
The science laboratory adjoins the cooking laboratory. It is a well-lighted room of 15 feet by 28 feet with floor of red tile. A cupboard with shelves and glass doors above and closed compartments below occupies the width of one end. Along the four windows at the side is a shelf 1 foot 9 inches wide and 3 feet high where the microscopes are placed for class use. Below this shelf are a row of drawers and several small compartments where the microscopes are kept. The tables are 16 feet long, 2 feet 10 inches high and 1 foot 6 inches wide. They are arranged parallel in the center of the room. Between them and connecting them is a drain 14 inches wide which runs the full length of the tables. Above the drain and under a row of two small shelves, the gas and water pipes are suspended. There are twelve individual water taps and bunsen burners. The tables have a row of drawers beneath and at each end a small closet. Stools are provided for the pupils and there is a blackboard on the wall. In this room are taught Bacteriology, Analysis of Urine, Drugs and Solutions, the laboratory work in Materia Medica, Anatomy and Physiology, and Chemistry. Classes of from 12 to 16 pupils can be taught in this room. There are three microscopes for the pupils use in Bacteriology; with a larger number of microscopes there would be less repetition, though by dividing the work all can be given an opportunity for using them. The tables are a little too narrow for convenience. If the width were 2 feet it would give the pupil more room for arranging her work before her.

The demonstration room is a well lighted and ventilated room of about 16 feet 6 inches by 28 feet 6 inches. This is a little small, a larger room could be used to better advantage, though this room is well equipped and arranged. The length of one side is given up to a long closet with glass doors. This closet extends from the floor upwards to 5 feet 10 inches, and the shelves are 10 inches wide. Here are kept the smaller articles, ward utensils, rubber goods, linen, trays for treatment, etc. The room contains four beds and bed-side tables, a large table 7 feet 4 inches high by 2 feet 6 inches wide in the center of the room, chairs for the nurses and the blackboard on the wall. In connection with this room is a utility room 8 feet 6 inches by 12 feet. This room contains a sink, hot and cold water, a small gas stove and table, ice-box, and a small closet for other apparatus. A list of the entire equipment of all of these rooms, accompanies this paper.
In large schools a small class-room apart from the lecture or assembly room would be a great advantage. This room should be large enough to seat the largest single class, and should have good cupboard and closet space where the models, charts and skeletons, etc., may be kept. This room should be provided with a table large enough to permit the instructor to show to good advantage the models, etc., that she will use in teaching.

For the laboratories a room that is somewhat longer than it is wide, is more easily arranged to advantage. A long narrow room is difficult to furnish conveniently, and to light well unless the long side is exposed to the light. It is best to have the floor of tile, also the wall extending upward for about 6 feet. It is costly, but wears well and can be kept absolutely clean. The best arrangement of tables is the rectangular or hollow square when floor space is available, as this enables the instructor to observe her entire class easily, and to pass from one to another without loss of time. It is the attachment of shelves, drawers and cupboards, that add materially to the cost of the tables, not so much the material but the labor involved in construction. Elaborate arrangements also make the care of the table more difficult. Small sinks connected with the tables, or nearby, while expensive, add greatly to the convenience of the workers for the hot and cold water are then near the work tables. The sinks at the sides of the room should be broad and deep. Since the success of the work depends largely on the utensils, great care must be exercised in their selection. It is not economy to have poor utensils, and for individual work they should not be too large. The attractive white enamel ware does not last as long as some of the darker colors.

In small schools of 50 or less pupils, the cooking laboratory may be the same room in which the special diets for the patients are made. The demonstration room if large may contain the tables and equipment for the work done in science. The lecture and separate class room may also be combined. If all these rooms can be planned separately, however, it is a great advantage.
EQUIPMENT OF DEMONSTRATION ROOM, BELLEVUE HOSPITAL NURSES' RESIDENCE

(Where number is not indicated one article is understood)

Enamel and glassware

Arm bath. Basins (gray enamel, 6; large white enamel; small white enamel, 5; eye, 3; pus; kidney, 2); nursing bottles, 2; bottle brushes, 2; bottle cover (baby); bowl (glass); cups (drinking, sputum); cradles, 3; croup kettle; croup tent; canisters, 3; foot tubs, 2; funnels (glass and enamel); flasks (large and medium); fracture board; graduates (glass, 32 oz. and 8 oz.); hot air apparatus; irrigating cannula; irrigating pole; instrument sterilizer (electric); ice pick; ice mallet; ice bag (canvas); incline plane and pulley; jars (glass, large, 3; small, 7); "L" supports for bed clothing; measures (metric, 500 cc., 250 cc. and 150 cc.); oil silk jacket; pail (white enamel); pans (large white enamel, 4; small white enamel; bed; douche; sauce, for poultices); pitchers (large white enamel 4 quart; medium white enamel; small gray); pack wringer; poultice board; spoons (gray enamel; silver table); stupe wringer and sticks; stupe flannels, 2; stupe and poultice protectors (oil silk), 3; spatula; side boards, 2; shock blocks, 4; splints (Hamilton, elbow and sliding); tooth mug; trays (large glass instrument; small glass instrument, 3; bed side).

Instruments

Artery clamps, 3; applicator; aneurism needle; atomizers, 2; breast pump; carrier; catheter (tube); catheters (glass, 2; rubber; silk; lisle; Coudé) chloroform inhaler and bottle; douche nozzles (hard rubber, 3; glass; intra-uterine); drainage tubes (glass), 2; Esmark bandage; eye cup; forceps (thumb), 2; floaters (glass, for marking solutions), 2; grooved director; Hoffman's screw; infusion needle; mouth gag; minim dropper; needles (surgical), 6; nipple shield; pessary; razor; scissors (curved; bandage; straight); syringes (glass irrigating, 2; ear); silk-tube; tracheotomy tube; tape measure; tubes ("T," "Y"); tourniquets, 3; thermometers (clinical; bath, 2; room).

Bandages, binders and surgical materials

Bandages (gauze roller; muslin; red flannel; canton); binders (breast, 3; abdominal, 4; scultetus, 2; "T," 2; aspiring; four-tailed (for ice cap); restraints, long, 3; restraining jackets; triangles, 2.

Rubber goods

Apron; bags (douche and hot water); ice caps, 2; ice coils; inflator; Kelly pad; pillow slip; rings (invalid, large and small); rectal tubes, 2; stomach pump; syringes (bulb and fountain); sheets (long black, 2; short black, 3; long white, 2; short white, 2); tubing, large and small.
Furniture

Beds (hospital, home and crib); bed side table; black board; back rest; clock; chairs, 14; canvas cot; dresser; foot stool; screen; steamer chair; table (large); toilet set; waste basket.

Bedding and linen

Blankets (balcony, 2; bed, 7; bath, 6; isolation, 7); bags (clothes, large and small); cap (surgeons); covers (bed pan, 3; ice cap, 3; screen, 6); gown (surgeons); gloves (surgeons); laparotomy suits; pillows (hair, 5; feather, 3; small, 2; knee); pillow cases (large, 12; small, 6; knee, 2); sheets (pin bed, 14; mattress, 6; draw, double, 6; draw, single, 6; laparotomy; perineal; crib); spreads (bed, 6; crib, 3); towels (face, 12; bath, 6); wash cloths, 10.

Clothing

Men’s—Pajamas; night shirts; bath robe; socks; slippers.

Women’s—Night gown (long, 2; short, 2); wrapper; petticoats; drawers; stockings, 2 pairs; vests, 2; slippers; nightgale.

Children’s and Babies’—Dresses, 2; petticoats (white and flannelette); drawers, 2; vests (flannel); night gowns; stockings, 2 pairs; shoes; under waist; bib; bonnet; slip.

Miscellaneous

Adhesive plaster; baby outfit in box; cotton (absorbent and non-absorbent); crane; cabinet of drugs; chart back; card holder; gauze rolls; lint; mole skin; oakum; plasters (belladonna, causthrides and mustard); rubber tissue; table pad for large table; unbleached muslin; oil silk; anatomical models (eye; ear; brain; kidney; heart; skin); dolls (chase; rubber; cloth baby); bandaging models of chest, arm, leg, head.

Trays complete

Bath Tray—Enamel jar for mouth wipes; mouth wash jar; bottles (back wash; mouth wash); small tray with brush, comb, orange wood sticks, and nail brush; whisk broom; paper bag.

Cupping Tray—Metal applicator, cups; alcohol lamp; cover jar with cotton; match holder; bottle of alcohol.

Hypodermatic Tray—Enamel jar for carbolic solution; enamel jar for wipes; dish for waste; bottle for alcohol; hypodermic syringes (glass or metal); small forceps; tablespoon.

Medicine Tray—Medicine glasses; minim glass; measure for seidlitz powders; dropper; small glass pitcher; medicine tickets and list.

Nourishment Tray—Glass, 2; saucer; feeding cup; drinking tube.
EQUIPMENT OF DIET KITCHEN

**Furniture**

Black board; bread boards, 12; closets for china; gas stove, with oven and broiler; gas stoves, (individual), 12; refrigerator; sinks (porcelain), 2; tables (individual 35 inches high with drawers for utensils), 12; table (large for supplies).

**Utensils (Equipment for tables—12 of each)**

Apple corers; asbestos mats for cooking; asbestos holders; bowl (white china); bowls (1 pint); custard cups; coffee pots (small); covered stew pans; Dover egg beaters; double boilers (small); dish pans (small); drinking glasses; dinner knives; enamel plates; forks; fine strainers; glass measuring cups (divided into quarters and thirds); glass lemon squeezers; jelly molds; knives (paring); muffin rings (poaching eggs); spoons (tea, table, wooden, and wooden split); spatulae; shakers (salt and pepper); small frying pans; sauce pans; porcelain covered jars (waste); soup plates; tea cups and saucers; wire egg beaters.

**Extra equipment**

Bowls (yellow mixing), 6; breakfast sets for trays, 3; basting spoons, 3; bread graters, 4; biscuit cutter; colanders, 2; can openers, 3; cake turners (perforated), 6; coasters (glass), 12; coffee pot (large); cream pitchers, 6; enamel pudding pans (18 x 18 ), 2; enamel pitchers (assorted sizes), 6; finger bowls, 12; flour sifters, 3; forks, 6; ice mallet; ice pick; ice crusher or canvas bag; ice cream freezer (small); jars (spice, flour, sugar and salt); jelly cake tins, 2; knives (bread), 6; nutmeg graters, 4; rolling pins, 4; set of dishes for 12 persons; set of muffin tins, 2; square cake tins, 2; spoons (tea, 12; soup, 6); trays (large, aluminum, 3; medium aluminum, 3; small aluminum, 3).

**Linen**

Napkins, 12; tray cloths, 12; lunch cloths (small for desk), 12; table cloths for supply table, 2; towels (tea, 12; dish, 24; individual hand, 24); cloths (scrub, 6; sink, 12; oven, 6).

**Refrigerator equipment**

Enamel plates, 6; bowls with covers, 6; pitchers 1 quart, 2.

**Miscellaneous**

Hand scrubs, 12; dust pans, 2; floor brushes, 2; garbage cans (medium size), 2; soap dishes (enamel), 4; meat press, 2.

EQUIPMENT OF SCIENCE LABORATORY

Alcohol lamps, 3; albuminometers, 4; Arnold sterilizer; Bunsen burners with metal connecting tubes, 11; bottles for reagents, 70; funnels, 4; hot air sterilizer; incubator (small); measures (graduated, assorted), 4; micro-
scopes, 3; petri dishes, 6; specimen plates (glass), 3; scales; sink (porcelain); specimen glasses, 16; stools, 30; tumblers, 6; test-tubes, 21; test-tube stands, 4; ureometers, 12; urinometers, 3.

Miss Walsh: We have scarcely any problems to solve in the class room, as Lane Hospital, which is affiliated with Stanford Medical School, adjoins the college, and we have the use of all of the college class-rooms. For instance, in anatomy and physiology, the students' room adjoins the dissecting room and the specimens from the pathological laboratory come from downstairs. All our teachers in pathology and anatomy are professors in the medical school.

The President: That is the relationship we should like to see exist in all training schools, to have them linked up with a university in some such way, and avoid duplication of class-rooms and teachers.

Miss Goodrich: There are somewhere in this building—I know not where—bulletins from the Teachers' College telling of the classes next year; also there is a little pamphlet of the Teachers' College alumni, a rather interesting book, which has been widely circulated amongst the various schools and colleges. It sells for ten cents, and it would be well perhaps for some to have copies to present to people outside who are interested in the nursing profession.

Upon motion, duly seconded, the meeting adjourned.

Tuesday, June 22, 8 p.m.

FESTIVAL HALL, EXPOSITION GROUNDS, OPEN MEETING

Miss Noyes, President, in the chair.
Organ solo, Dr. Maurice W. O'Connell.

The President: After this delightful recital it seems rather materialistic to come back to the more serious part of our program, but we are really here to hear some interesting papers.

We are to have a testimonial and presentation from the Board of the Exposition, and Mr. Colvin Brown, who represents the Board, will make the presentation speech.

Mr. Colvin Brown: We are here tonight in this temple erected to music, and it would almost seem to be sacrilege to make any
speech after the music that we have heard. But it is customary on the part of the Exposition, whenever any body of people attends as a body, to have a very brief ceremony. You are here tonight upon the grounds of the Panama-Pacific International Exposition; you have undoubtedly been around more or less, and have had at least a cursory view of this finest of spectacles. You undoubtedly know that the builders of this Exposition obtained the very best architectural and artistic talent. They have gathered together the perfection of the architecture of the Golden Age of Greece, the purity of the art of Spain's Renaissance, and they have spilled upon it all the color of the Orient. From every part of the world they have gathered the very best of human achievement and placed it in these palaces, for your information and pleasure. These palaces will soon be things of the past, but there must be something to live on and on to justify the expenditure and the effort in erecting these buildings. And that which will justify the effort is the good that will flow from the congresses and assemblages which will have met here. It is utterly impossible for me to express to you how greatly I feel the honor of being able to address a body of women representing what you do in the world's work; you who have come here to San Francisco to meet together to compare ideas and to learn what you may from the exhibits of social economy in the palace over yonder. Out of your meeting here will grow something that will make for the betterment of mankind. It is meet and proper, and more than that, that this Exposition on this occasion should extend to you some small tribute of its appreciation, and I am to present to the President of the American Nurses Congress this medal.

The President presented Miss Annie W. Goodrich to receive the medal.

Miss Goodrich: The very great honor has been accorded me by our President of receiving in behalf of our Associations this tablet from the Exposition. I do not feel that I can in any measure adequately express what it means to us, and to the many thousands of nurses in our organizations. The American Nurses' Association represents over thirty thousand nurses. The League of Nursing Education (one body of educators) has a membership of over four hundred. The Public Health Nursing Organization, increasing year by year, has enrolled over fourteen hundred. Not
only for these must I speak, but for those who would have been with us tonight had our earlier plans materialized. We had hoped to have many delegates from Great Britain and Ireland (we have two), from Germany, Sweden, Denmark, Italy, France, China, Japan, New Zealand, and Australia, but the great tragedy on the other side has prevented the attendance of all these, and of many of our own members as well. Today, one of our women to whose efforts the great increase in the enrollment of Red Cross nurses is due, Miss Delano, is at her post in Washington, for she dare not leave. And there are many absent because they feel that their thought and time and money must be given to the other side of the Atlantic. Perhaps there never was a time when we were so deeply concerned with the preparation of our nurses, and yet many of us felt we could hardly muster courage to come here when such a terrible crippling and waste of life was going on in another part of the world. Today we feel more than repaid in the stimulus we have received. We cannot go through these wonderful grounds, cannot contemplate the courage that against all discouragement has built the great Panama Canal, without feeling a new impetus to our own endeavor. And we realize that now is the time for us to prepare our women for the work to come, for never has the demand been as great as the demand will be in the coming years. In the social awakening that has taken place in the last few years the nurse has been assigned a definite place. Perhaps there is no person, no servant of the community whose service has so permeated the social fabric as the nurse. From the costliest residence to the most poverty-stricken tenement, in the factory, the shop, the school, the desolate rural community, the nurse is needed, and is found today. To discuss the preparation of these women, we have come together from all over the United States and even from across the waters at this perilous time and we hope that our conferences will lead to a preparation that will enable our members to more efficiently render the service the community asks of them.

In the name of our Association, Mr. Brown, I beg to thank you in this very inadequate manner for this acknowledgment of our presence here, and for the stimulus you have given to our efforts.

The President: We will now proceed with our program, and I
have great pleasure in introducing to you Dr. Edwin R. Snyder, Commissioner of Vocational and Industrial Education, California.

Dr. Snyder: My paper is going to be a talk. I wish to state that so many nurses in one body embarrass me. I have had a few experiences of nurses. I cannot understand why a mere Commissioner of Vocational Education should have been brought to talk to a body of nurses. My experience with nurses heretofore has been that I did not have any opportunity to talk. In my own home the nurse did all the talking that was done when there was anybody ill, and the men in the house particularly, did not have anything to say. When I first started out in a home, I divided the authority, and I did not know who was boss. Then the first boy came, and he was called the king, and we knew who was boss. Then he grew older, and a little girl came, and the king was displaced by a queen, and we thought then we knew who was boss in the house, and all went swimmingly, till both children became very ill, and we called in a nurse. And we found out who was boss. The mere father of a child does not amount to much when there is a nurse in the house. What I really want to say at this point is, that no one who has not had the need for a nurse understands what the nurse means in this world, and no one who has had the experience of having a nurse take care of some one dear to him, can understand how the nurse welds herself into the hearts of those she serves. Of all professions under the sun, it is the one nearest to the hearts of the people, and perhaps the profession of medicine comes next, and perhaps the profession of teaching next to that, and perhaps the profession of law after that. But I believe the service that is greatest of all social services, is that of the nurse if perhaps we except the minister. But the nurse is a minister in a way.

Then I thought perhaps the reason I was brought before you to talk was, that nursing being a vocation, it was recognized that when a great state is to solve the problem of vocational education, it cannot solve it without taking into account the education and preparation of the nurse.

I am going to speak a little of vocational education and the trend toward it and what it means. Some seven, or eight or nine centuries ago, when the first universities were established in Europe representing the beginning of the organization of western
culture, the great universities on the continent established as part of their curricula professional courses in all of the professions. Some of them had only theology and teaching, others had theology, teaching and law, and one had the profession of teaching, theology and medicine. The profession of nursing was unknown then, and indeed the profession of nursing was unknown until very recent date. Over in the British Isles, when the great universities were organized, they had no professional courses except that leading to the ministry. The courses in the universities of Europe or Great Britain, were so-called liberal arts courses, and when in America, we established our first universities and colleges, we imitated bodily the English university and college. Our first university, Harvard, was a liberal arts institution. It was many years after Harvard was established before the first professional course crept in. Professional people in medicine, and law and teaching, secured their training for their professions in a sort of apprenticeship and so the nurse in the beginning of her training learned in exactly the same way, by being attached to a physician, and learning as best she could in her work with him. This produced a type of nurse more or less skillful in a manual way, but with little technical training or realization of the technical aspect of the occupation. A few realized the psychic aspect, but only in recent days have we discovered that nursing is a real profession, consisting not only of manual skill, but of technical knowledge and a knowledge of the working of the mind of an individual, and particularly of the working of the mind of an ill individual. Not until universities established the training school, in connection with the profession, did they become efficient institutions. The schools of education established training schools of teaching, schools of law established a method, the case method in which rude courts were held in which young men actually practiced in a court very like the real ones, and the medical schools have attached to themselves great hospitals where young men and women studying medicine, can go out and get actual practice. And further they have enacted that the young men may attach themselves to family physicians and so get actual practice. That represents pretty much the general history of the development of this profession, and your profession is just coming into its right, just beginning to break into the University and into
the lower schools, breaking into the universities with tremendous force, and why not when there are so many representatives of this profession in the country?

Leaving that, I want to speak about the general vocational situation, or some aspects of it. The only vocational schools we have really in this country, are the universities and the normal schools. In the universities all the professions I have mentioned are trained. They have courses in electrical and mechanical engineering, civil engineering, agriculture, horticulture, and general farming, and in many other things. It is possible for any young man who succeeds in finishing high school, and for some young women who finish high school, to secure a vocational education in some university. There is ample opportunity for the men, and some for the women, and it is being increased. In the secondary schools, we have but slight provision for education that will train the individual for actual occupation. In Europe it is most common, in Germany, France, Scotland, and many other of the European cities, vocational education has been carried on to the fullest efficiency, and this education means merely this, that each individual who finishes the public school system shall have training to fit him for some occupation. It does not mean that each boy shall be trained to fit into a trade, or each girl to fit into a particular occupation. It is quite a fallacy to assume that each individual ought to have a trade. There is too much time wasted now in securing education that bears no relation to the occupation people are going to enter. It is astonishing how much time is wasted on subjects that bear no relation to the subject of medicine, for instance. A few years ago a classical course was the preparation for all university work. Then they took the liberal arts course, and after that were put into a medical school to learn all there was in medicine. Think how much a man can get of all there is to learn about medicine in a school course, with eight years before that wasted in geometry, algebra and calculus—things that bear no relation to the work of the physician or the nurse.

We have an educational system, then, that prepares individuals largely for the university, and the university trains for the vocation. Our whole school system is largely run and established for the benefit of individuals who are going into the university or the
normal school, and the 95 out of 100 who do not go into these institutions pass out into life with an education that does not fit them for any occupation. This is a problem of profound importance.

To get more closely to the subject I have in mind, I will speak a little bit on nursing as a vocation. There are not many occupations, when you come to list them, that women enter. Most of them grow out of home activity. When we establish vocational courses for women in the schools, we will have to have two things in mind. There is one vocation in which almost all the workers are women, that is the vocation of nursing, and in this hundreds of thousands start out, get a splendid education, and nurse about six months or a year, and then pass into matrimony. Perhaps they are pretty good housewives and mothers. I think the training a nurse gets ought to fit her to be pretty good for home making. Now the home making courses for women in secondary schools are going to be the essential courses, although we will have to include in that a good deal more than is usually thought of. Cooking will include dietetics, chemistry, food study. Sewing will include more than mere making dresses or millinery. It will include the study of the function of clothes, the study of how to clothe the child, etc., and we shall have to include home nursing, physiology, hygiene, and bacteriology, and so you see in that home-making course, you will have the beginning of many different occupations, and particularly a good beginning for a course in nursing.

Someone is going to speak later on the affiliation of the nurses’ affairs with universities. There is just about as good opportunity to affiliate hospitals with high schools as with universities. Some of the high schools have laboratories in chemistry and biology that are superior to many in the universities and colleges. The high school in this state has a course which extends beyond the high school course two years, and does the first two years of college work, so there is no reason why there could not be satisfactory cooperation between local hospitals and high schools, because the laboratories are there and the teachers to do the work.

I think there is some danger of setting your educational standards too high. When this is done in teaching the salaries of teachers jump 30 or 40 per cent, and you create something like a
trust. Then there is the practical difficulty of supplying nurses for the poorer class of people. I feel that there is room for a less highly trained class of nurses to care for those cases that are not serious—the little illnesses of children, and of convalescent patients. That is going to be the field of the secondary school, and this course will give people the best preparation for getting into the study of professional nursing or medicine.

The President: I have much pleasure in introducing Miss Edna Rich, President State Normal School of Manual Arts and Home Economics, Santa Barbara, California, and member of State Board of Education, who will speak on “Possible Coöperation Between State Normal Schools and Training Schools.”

Miss Rich: To me it is a very great pleasure and privilege to come before a body of people who are consecrated to the saving of human life and the promulgation of good wherever they find it. Miss Goodrich has told you how the nurses go about in the rural communities and in the cities, carrying the message of health and the message of help. I represent to you in this state, and perhaps in the West, the State Normal School of Home Economics, at Santa Barbara. Anna C. Blake, in 1891, started the cooking school for children in Santa Barbara, and it has grown until, it has blossomed into a State Normal School of Home Economics, the first in the United States. It is my good fortune to have helped to bring it into being, to have written the bill, and asked for money, and gotten it, and spent it in a way that is giving returns to the state of California. We are training young women to go back into their schools and homes, to carry the message of home making, of sanitation, of personal hygiene, of economy. Conditions can be made right in the community only as the mother in the home, and the social workers are trained. The Normal School in Santa Barbara has already sent out four hundred graduates. Some are working in hospitals and teaching dietetics. The Santa Barbara Normal School offers nurses a special course in the Department of Institutional Management. It includes courses in chemistry, food economics, and invalid cookery. Psychology is also valuable to the nurse because it helps her to understand human nature. The cost of the course is $30, and it will be given if ten nurses register. We have had several inquiries,
but as yet only one has come for the course. We will be glad to welcome any of your members who wish to visit us at Santa Barbara.

The President: We are much indebted to Miss Rich for telling us about her school. I am going to ask Dr. Downing, Assistant Commissioner of Education of the state of New York, who has always been one of our best friends of New York state and helped us in many difficult situations, to say a few words to us.

Dr. Downing: Madam President, ladies and gentleman: I am afraid I am on the other side of this nursing question, from that of the former speakers, for the reason that in that influential if not great state of the Union, the Empire State, they classify Nursing in the field of higher education. From the days when Florence Nightingale established this occupation as a work of salvation to humanity, it has been going steadily forward from the position of an occupation to a profession, and just the moment that any occupation, whether it be dentistry, or pharmacy, knocks at the door of the professions it admits two fundamental essentials, first academic training, and second scientific training.

Now I am an earnest advocate of vocational training from the elementary school up; that the boys and girls of this great country shall be taught handicraft, that they may go out when necessity requires, and earn more than 50 cents a week; may earn a competent livelihood, so that they can work and contribute toward the support of their families later on. Nobody knows better than I what it means for the poor man to exist in a great city like San Francisco, or New York or Chicago. I know these families do not live, they barely exist. It is necessary for the children at thirteen or fourteen to leave the school and go to work, and I believe in vocational training in the grammar school that they may earn some money that is worth while and be fitted to enter some trade.

But when it comes to preparing for a profession, I believe that no woman or man has a right in a profession without an academic training as thorough as may be secured. When my friend—and I respect him highly—asks of what use will be geometry and algebra to the man or woman in the profession, I think of years ago when I was a teacher hearing a speaker address an assembly larger than this. Some man in the audience thought algebra
and geometry were no use in the education of the boy or girl in high school, and, the speaker who was the pastor of the Church of The Strangers in that great city of New York, and a worthy pastor of such a church, the milk of human kindness fairly beam­ing from his countenance, answered him. He walked up and down the platform as though he were thinking of long years back and said, to the man who raised the objection,

Well, my friend, I do not think that I ever gave out from my pulpit as a text, that the square of the sum of two quantities is equal to the square of the first, plus twice the first into the second, plus the square of the second, or gave it out as a text that the square of hypothenuse is equal to the sum of the squares of the other two sides, but I remember as though it were yesterday, when in my room alone I saw through the saying that the square of the hypothenuse is equal to the square of the sum of the other two sides, and when I knew I could demonstrate to men and angels that the square of the hypothenuse is equal to the sum of the squares of the other two sides, I could feel myself swelling up as if I was somebody, and I have never preached a sermon that convicted the sinner of his guilt, or persuaded him to love Christ, but the power of that moment did not help me to do the work I have had to do ever since.

Ladies and gentlemen, nurses—and back in my state they all know that I love them, and I have the satisfaction of knowing that they all love me (laughter) because they are engaged in the same kind of work that I have been engaged in ever since I was seventeen, trying to do something for my fellow-men, and to make their lives a bit easier—nurses, I say, let us not lower the stand­ard of academic training for your profession. We demand one year of high school work. A person to be trained in our state must have completed the first year of high school, and I hope to live to see the day when the requirement will be at least a high school graduation. Where the nurses training schools are con­nected with the universities, there is demand for a high standard of training. The lady who was to have read a paper at this meet­ing, Miss Powell, has my highest esteem. The University of Minnesota stands as one of the noblest examples in this question of the standard of nurse training. Columbia is another. It is my business to be familiar with these training schools. I have charge of the registration of nurses' training schools all over this country and Canada, so I know the nurses' field, and know it thoroughly.
Do not be deluded into the thought that a short course will make a nurse today. You cannot get a scientifically trained medical man in less than four, five, or six years. He must have, in Johns Hopkins, an A.B. degree; in Harvard, three years of college; in Cornell, three years of college; in Columbia College of Physicians and Surgeons, two years of college, before being admitted to the school; four years of the severest kind of work, and then be an interne for one or two years. No man can be a dentist without four years of high school work, and three in a dental college, and all over the country they are advocating the four-year course in dental schools.

When you take into account that the nurse gets a few hours a week in theoretical training, and most of her time is taken up with the practical side of nursing in which she does get the severest kind of training, you will realize that she cannot do it in one year, she does it only moderately in two, and does not do it absolutely well in three. But still three is all right, but do not for the moment think that a nurse can have a professional training such as she ought to have without spending three years. She may be a trained attendant and all that, may be able to take care of the paralytic or chronically ill patient who only needs to be assisted, or the person with a broken leg who just needs to be helped for a few weeks and then she is a trained attendant, but she is not a professional nurse.

I did not come here to speak; if I had expected to speak in the presence of this company I surely should have had on my wedding garments as a mark of the respect which you deserve, but I am so convinced of the dignity, of the importance, of the absolute necessity to the world of the nursing profession, that it kept me holding on to myself pretty hard to have you think—if you did think; I rather thought you did not—that anybody could pull the wool over your eyes. My heart is so with you as a profession that I cannot listen contented to any advocacy in public or in private of a low grade of academic training, or a low grade of professional training for women into whose hands the very life of the public in the years to come is to be committed, and I thank your President, and you, ladies and gentlemen, for an opportunity, even in my working clothes, to defend the position which I take always in our own state of New York. [Applause.]
The President: We thank Dr. Downing and are deeply grateful for this appropriate rounding out of our program, which began so delightfully with music and ended so delightfully with what was music to our ears, the defense of our standards. I am sorry that the time is too short for the reading of Miss Powell's paper on "Existing Affiliations Between Training Schools and Universities," but it will of course be published in full in the Report. Miss Powell is Superintendent of Nurses and Principal of the School of Nursing, University Hospital, University of Minnesota, Minneapolis.

EXISTING AFFILIATIONS BETWEEN UNIVERSITIES AND TRAINING SCHOOLS

For many years there have been training schools for nurses in connection with hospitals used for clinical teaching by the medical departments of universities. In 1897 Texas founded such a school as a department of the Medical School. All of these training schools are more or less under university control, in most of them teaching has been done by members of the faculty of the university, in some the laboratories of the university are used, in many the diploma is signed and presented by the president of the university, in a few university entrance requirements are made for nurses.

There are such schools at present at the University of Texas, of Michigan, of Iowa, of Virginia, Washington University, St. Louis, and George Washington University, Georgetown, D. C. All of these things and many more are necessary in order that a training school may be truly affiliated with a university.

The credit for having first organized a school for nurses, as a department of the university, with the same standing as other departments, must be given to the University of Minnesota.

In March, 1909, the Board of Regents of the University of Minnesota started a school for nurses, under the Dean of the College of Medicine and Surgery, but with its own head, the Superintendent of the School for Nurses, who is a member of the faculty of the Medical School. The method of admission is as follows: Educational credentials are sent to the Registrar of the university; if these credentials entitle the student to enter the col-
college of science, literature and arts, they also entitle her to register in the school for nurses.

A slip is sent to the student from the Registrar stating this fact, and this slip also contains a space for the dates of the meeting with the Enrollment Committee, and of the physical examination. This slip is forwarded to the Superintendent of the School for Nurses and is held by her until the student meets the Enrollment Committee, and has had her physical examination by a member of the staff. This slip, with the signature of the Superintendent, entitles the student to matriculate.

The Enrollment Committee is made up of the Superintendent of the School for Nurses, the Superintendent of the Hospital, and a member of the Medical Faculty. All official appointments are made by the Board of Regents on the recommendation of the Administrative Board of the Medical School, to whom recommendation has been made by the Superintendent of the School for Nurses, or the Training School Committee.

The student pays a fee of $25 and a laboratory fee, which is returned if not used. She lives at her own expense during one semester, and pays for her own text-books. During one semester the student has 24 hours of work a week in the university, 5 of which are with the Superintendent of the School for Nurses. The nurses have all the university holidays during the semester, and enter the hospital for two months, either at the beginning of February or June. This period of probation is followed by two and a half years in the hospital.

The nurses have a section in the Gopher, the university junior annual, have the benefit of the Women's Building for their dances, and enjoy all the privileges of other university students.

If a student gets a condition in any subject the examination must be taken again; if she fails the course must be repeated.

The degree, Graduate in Nursing, is conferred at the annual commencement. The nurses, dressed in cap and gown, rank as seniors, and receive their degrees from the President of the University. The Superintendent of the School for Nurses presents the students to the President, just as the Deans of other schools present their students.

At the close of the school year, in June, reports similar to those used in all departments of the University are sent to the Regis-
trar's office, giving the rating of each student in all class and lecture work taken during the year. At the close of the three years a record of the practical work (the days or weeks spent in the various department of the hospital) is sent to the same office, thus insuring a complete record of the student nurse for the three years, kept with other university records.

The Medical Library is situated in a building in the same block with the nurses' homes. All nursing magazines and books are kept there, and students are allowed to go to the library in uniform.

The question of how much credit may be given for the preliminary course, to students taking their B.A. degree who desire to enter the School for Nurses, is now being considered by the Administrative Board of the College of Science, Literature and the Arts. Two plans seem possible:

1. To allow students, during their four years, to take the required subjects as electives.
2. To allow these students, during the last semester of the senior year, to take the preliminary course.

Either of these plans, if followed, would mean a saving in time to the student, of eight months.

Indiana University has very closely followed the example of Minnesota and has even exceeded her in the amount of credit given for the nurse's work, and in the amount of credit in time that is given in the School for Nurses for work done in the University. Here all students must meet the University educational requirements for entrance. A student may take a preliminary course of one college year in the University, living at her own expense, followed by two years and eight months spent in the Robert W. Long Hospital.

A student may, after spending three years in the University, provided certain required subjects have been taken, enter the hospital for two years and four months. For this work a diploma of graduate nurse, as well as a B.S. degree will be given. High school graduates spend their full three years in the hospital, during the early months of which time, a preliminary course is given. At this time the student nurse does not pay a fee. The diploma will be granted by the University, whether at the annual commencement or at a training school commencement, has not been
decided. In neither of these schools is an allowance paid the student.

In 1909 Teachers College started a Preliminary Course for Nurses, in the Department of Nursing and Health, which hoped to attract women of ambition, who could afford to take this course, and to whom the better preparation for the work of nursing would appeal. A high school education is required for matriculation in this course, and after satisfactory completion of the work, which covers a college year, the student will be admitted to one of several good hospitals, where full or partial credit in time will be given.

After the completion of the full nurse's course in one of these schools, the student may return to Teachers College to complete work for a Bachelor's degree with a major subject in Nursing—the whole term of training requiring about five and one-half years. The fee for this course is about $200, to which must be added the living expenses of the student during her time at college. Owing to the lack of any close organic relationship with hospital training schools which would ensure continuity to the work begun in the college, it has been difficult to develop this work satisfactorily, and few students have entered for it. As the work of the department grows it is probable that this branch will be developed in a somewhat different form.

In 1911 the University of North Dakota established a Preliminary Course for Nurses very similar to the one at Teachers College, which has been carried on thus far along the following lines:

The course has covered one college year, the student finishing her nurse's training in one of several hospitals. High school education is required for entrance. A fee of $25 is charged to cover cost of materials, laboratory supplies, etc., the student living at her own expense.

The director of this course is a nurse, who is a member of the Faculty of the Division of Medicine in the University. A certificate for the work done during the course is given by the University, the nurse's diploma being granted by the hospital in which the course is completed. In February, 1915, it was decided by the University authorities that not one year in the University would be required, but two full college years. We fear that here again, as no training school taking these students for their practical work would make this two years a requirement, few students will feel disposed to spend so much time.
In 1910 the University of Missouri at Columbia organized a Preliminary Course for Nurses, which is different from all the rest, and is interesting because it shows a desire to help raise the standards of nursing education throughout the state. High school education is not required for entrance, there are no fees, the student lives at her own expense for six months. The course is offered to several classes of students.

a. Students who wish to finish their training at the Parker Memorial Hospital, Columbia, which is the University Hospital.
b. Students who wish to enter some other school in the state.
c. Students referred by reputable training schools in the state.
d. Graduate nurses who wish to take only the preliminary course.

From my experience in Minnesota where the preliminary course is required, and not optional, I feel sure that the requirement of this preparation is a fundamental principle that should not be departed from in a school that claims to be a university department.

In our own experience, while the cost is high, it has not deterred students from entering the school, and now at the end of six years, with a hospital of 200 beds, and a school of 50 nurses, we have as many applicants as we can take, with a prospect of exceeding this number during the coming fall.

Why are the students willing to pay $150 in money and spend three years, during which time they are getting no remuneration, unless it is that they know they are getting an education that is worth the price? The very fact that the University is back of the school and just as responsible for the education given its nurses, as it is for that given its teachers, its doctors and its engineers, is a guarantee to the student of fair play and a square deal.

Is there any more reason why the state in its University should train teachers, doctors, lawyers and men and women in all the various other professions and vocations, than that it should train the women who are going out to promote and preserve the health of the people by preventive nursing, and to restore to health those who are ill?

I think our universities all over the country, especially those supported by the taxes of the people, owe it to the public that they should take a hand in the training of so important a public servant as the nurse is getting to be.
In these schools under university control the following points should be absolutely insisted upon, not one or two of them, but all:

1. The head of the School for Nurses should be a member of the Faculty.

2. The students should be required to present the same educational credentials as for entrance to other departments.

3. The preliminary course should be required, and spent wholly in preparation for work in the hospital, the only work in the wards during this time being that done for the benefit of the student, and not for the benefit of the hospital.

4. These students should not be paid a monthly wage, which makes them employees, instead of students.

5. The hours of work in the hospital should be such that time can be had for study, and so that all lectures and recitations may be held in the day.

6. The nurses should be considered a part of the student body, and have a share in all the student activities.

7. The diploma, or degree, should be awarded at the time and in the place where other degrees are awarded.

These things will certainly tend to bring into our Training Schools the atmosphere of an educational institution, which will attract a better grade of students, and thus a better product will be insured. I am convinced that there are many advantages in the School for Nurses under university control.

The following are what we might call partial affiliations.

The School of Nursing in the University of Texas was created by the Board of Regents in 1907, as a department of the Medical School. The management of the curriculum is under the Regents, the Dean and two members of the Medical Faculty, together with the head of the school, a nurse, called Clinical Instructor in Nursing, who is a member of the Faculty. There are no educational requirements for entrance, the students are paid a monthly allowance, and there seems to be no preliminary course.

The Training School for Nurses at the University of Michigan is not a university department; it is under the control of a Hospital Committee, which is under the management of the Department of Medicine and Surgery. High school education is required for entrance, and a yearly allowance is paid. There is no preliminary course.
The State University of Iowa has two training schools for nurses, one to supply the hospital connected with the College of Medicine, one for the College of Homeopathic Medicine.

All students have their classes during the first two years together, but later have separate instruction in the subjects in which each medical college has a separate chair.

Each nurse's school has a head, whose title is Superintendent of Hospital and Principal of the Nurses Training School. She is appointed by the State Board of Education on the recommendation of the Hospital Staff, and is a member of the University Faculty.

These students are matriculated as university of students, although high school education is not required for entrance. There seems to be no preliminary course, and no allowance is paid.

The students from the two schools are presented by their respective Deans to the President at the annual commencement, when they receive a certificate signed by the President and the Secretary of the University. The students from the University Hospital wear cap and gown, those from the University Homeopathic Hospital wear the nurse's uniform. The nurses participate in many University activities, nearly all pupil nurses being members of the University Woman's League.

The Training School for Nurses in Washington University, St. Louis, was organized in 1905, as an integral part of the University. The Superintendent of Nurses is called Head of the Department of Nursing and Social Service, and is a member of the University Faculty. The requirements for entrance demand only a common school education, and at present there is no preliminary course. It is hoped that both of these things will be changed in the near future. There are no fees and no allowance is paid. Students who have taken the Preliminary Course at Teachers' College, New York City, are allowed one year in time in the Washington University School and those who have taken the four months' course at Simmons College, Boston, are allowed four months in time.

An unusual and interesting feature is the English courses which are given throughout the entire course. One week of work is given to Probationers in the Social Service Department, in order that the nurses may get some insight into the way their patients
live, the homes from which they come, and the difficulties under which they labor.

The Training School for Nurses in George Washington University, Washington, D. C., was inaugurated in 1903, under the general supervision of the President and Board of Trustees of the University and under the direct control of the Executive Committee of the Faculty of the Medical School.

There are no educational requirements, and a monthly allowance is paid. The diploma is presented by the President of the University at the Annual Commencement.

There is an interesting affiliation between the Children's Hospital in Boston and Simmons College. The students in this school are required to spend two months of probation in the hospital before taking the college work. After successfully completing this probation period, the student is sent to Simmons College for four months, during which time she lives at the hospital, but has no duties in the wards. This college work must be successfully taken and all conditions and failures made good. The fees for the full course at the Children's Hospital are $200, the hospital paying the college fee, and providing room, board and laundry during the entire course.

I would say to all women connected with Schools of Nursing which have a definite and integral relation to universities—do not miss an opportunity to grasp all that you can for your students; tie them up to the university in every way; see that they are included in university functions, and above all, create in them a feeling that they are university women, fitting themselves for a profession; give them a larger amount of freedom that will fit them to stand on their own feet, and do their own thinking. I heartily commend and endorse the plan of using our universities with their splendid facilities and equipment, in order that we may get better education for our nurses.

Wednesday, June 23, 1915

Meeting called to order at 11 a.m. by Miss Noyes, Chairman.

The President: Our first paper will be "How to Help Pupils to Study," by Miss Harriet Gillette, Instructor, Long Island College Hospital, Brooklyn, New York. The paper will be read by Miss Wilson.
HOW TO HELP PUPIL NURSES TO STUDY

It has been the experience of many training school instructors that a large per cent of the pupils do not know how to study so as to be most economical of time and effort, and the question has arisen, "How can we improve this condition?"

Pupils must feel their need for study before they will have any great interest in study. They must be made to realize that by learning how to study systematically they can get more with less effort and less expenditure of time. The aim they are to strive for throughout the course should be stated early and kept continually before them. It seems to me it should be every nurse's aim, "To be the best nurse it is possible for me to be." The thoughtful acceptance of this aim would be an aid in getting over into each pupil's experience the feeling of need for study.

The following are recognized as the most important factors in systematic study:

1. Recognition of the problem.
2. Gathering of data from various sources.
3. Organization of material into groups of related facts.
4. Exercise of scientific doubt or judgment as to soundness of statements.
5. Memorization.
6. Application of theory.

It is for the mastery of these activities then that we must work. I wish to suggest a few ways in which we can help the nurses to turn these important factors over into habit.

If very early in the preliminary course a lesson is given on the best methods of study, the pupils will have called to their attention points which will be of great help to them throughout the course. A lesson on habit formation would at this time help them to see the reason for always doing things the way they are taught—that only correct practice makes perfect.

These lessons would necessarily be very simple and would not require any great knowledge of psychology on the part of the teacher. Thorndike's [Elements of Psychology, James's Briefer Course, Colvin's The Learning Process, and Parker's Methods of Teaching in High School, or McMurry's How to Study, would give, very simply, enough for the teacher to use in these lessons.
The recognition of the problem is given as the first step in purposeful study. I believe one reason why we fail so often in teaching is that we do not have definitely in mind just what we want to bring out and just why we wish to emphasize that particular thing.

When the pupils recognize what the problem is they can more easily solve it. When they do not know clearly what they are looking for it is not strange if they do not find it. After the problem has been raised it is the duty of the teacher to see that they stick to it till it is solved. Stating the problem and sticking to it are the first and most important factors in study.

It goes without saying that pupils are most interested in those problems which present situations with which they have to deal in their daily work. For this reason the teacher should know what the nurses are doing in the hospital and should relate the class work to the work they are doing in the wards as far as possible.

The assignment of the lesson may be a great help in recognizing the problems to be studied. To accomplish this ample time must be given to this part of the work, instead of crowding it into a few seconds at the close of the period. The teacher should go over the assignment for the next lesson with the class, helping them to find the main points to be considered. To do this with the greatest economy of time, and with the best results the teacher must have prepared for this part of the work before coming to class.

Questions will come up during the class discussion which may be noted and assigned as a part of the next lesson. If these questions are sometimes assigned to individuals it gives them a sense of responsibility and in this way is an aid to interest.

All references should be noted in books kept for the purpose, and directions for written work should be clear and definite. The teacher must be most careful not to help too much as this will tend to make the pupils dependent upon her.

It is the habit of some instructors to give to their pupils, at the beginning of the course, an outline of the work to be covered with the references for each lesson. This has been most satisfactory in the cases where I have seen it tried. I can see that it would be difficult to get the outlines typewritten in some schools. This
plan necessitates the careful working out of each lesson before the course starts, which is of course the approved method.

After the problems to be considered have been carefully stated the next step is the collecting of data bearing on the problems. The teacher, if the time for study is limited, may give the books with the page numbers for reference, but some references should be assigned which give only the name of the book and occasionally the pupils should be required to hunt for books bearing upon the subject. This makes them independent searchers for knowledge.

Those schools that have a good reference library are most fortunate. Those that do not will find the public libraries glad to cooperate with the training school. In some cities the public libraries send sets of twenty-five, fifty or more books to any city school that leaves an order with them, the books to be kept several weeks or months and gathered again by the city when word is left with the library that a new set is desired. I see no reason why these cities should not be willing to loan books to the training schools on the same terms.

If the pupils are taken to the nearest library and shown how to use the encyclopedias, Poole's Index, and the card catalogue, it will stimulate them to use these sources of information and this will offer a good opportunity to encourage them to take books from the library on cards of their own.

Much can be done toward awakening the interest, to gather data by keeping a careful watch of the medical and nursing journals and making assignments to different pupils, on which they are to report in class. If a card catalogue of these articles is kept they will be available for future use.

It will be found of service to appeal to the collecting instinct of the pupils and in this way get together many pamphlets, magazine articles and pictures relating to the different subjects studied.

We are all more interested in those things with which we have some first hand acquaintance. For this reason those training schools that are near milk laboratories, chemical laboratories, baby-welfare stations, and other places of interest to the nursing profession, have an excellent opportunity to broaden and intensify the interests of the nurse and help her to collect data which she will remember longer than if she had read about it in some scientific article.
After the problem has been stated and the data gathered together, the material must be well organized or the preceding work will be practically useless, for knowledge which is not organized is soon lost. Perhaps the easiest way for pupils to organize their knowledge is by means of outlines. In order to start them right in this direction the main points brought out in the class exercise should be written on the board as the lesson progresses. At the close of the recitation, if this is erased and several of the pupils asked to recall these facts, as the lesson’s summary, they will be led to see the advantage of this method and also how to make a connected outline. When the assignment is made, the problems which the pupils find in it will serve as the skeleton of their topical outline on which they will elaborate as they study.

Note-books may be a great help in organization or they may be practically useless—the value determined by the interest taken in them. If the teacher goes over the books carefully and requires the pupils to correct the mistakes made, before the end of the first year the pupils will be able to do pretty good work along this line and note-book correcting will be made easier for the following years. If this plan is followed it is best to have the original notes written on the right hand page and the left hand page reserved for the pupil’s corrections.

Several dozens of note-books occupying all the available space and staring at the tired instructor are a disagreeable reminder of more work to be done. This part of the work will be less burdensome if the loose-leaf note-book is used, for only those leaves to be examined need be passed in, encased in a manila paper folder.

Very definite instructions should be given at the start as to the arrangement of the books, the meaning of the marks used in correcting and grading, how, when and where the notes are to be passed in; and no exceptions should be permitted without valid excuse.

The practice of writing in a few words the gist of a paragraph is not only helpful in organization of thought but in appreciation of meaning and concise expression.

When we come to the problem of teaching the nurse to exercise her judgment as to the soundness of statements, we have perhaps a more difficult task than we have yet encountered, but there are definite steps we can take that will enable her, in time, to evaluate with a good degree of accuracy.
HOW TO HELP PUPIL NURSES TO STUDY

We must show her as early as possible that the conclusions of men are continually changing on some of the most important problems, and that at no time do they all think alike. This, in our field of work, where one mode of treatment quickly follows another, each in turn based on perfectly good theory, should not be hard to do. We must teach her that the ready acceptance of everything she finds in print shows a lack of thought. This will be easily done if she is on the alert for magazine and newspaper articles bearing on her work, many of which are not in accord with our teachings.

She should be taught to verify statements by looking them up in some book of recognized authority. She should be taught to consider the author and the date of the publication, and to ask, "Will it work?"

Different members of the class may examine the same article and report independently on its merits, giving the reasons for their judgments. This gives good practice in weighing and considering the merits of statements.

So many people tell us they have poor memories and look upon that as an excuse for their lack of knowledge. But psychologists tell us that a poor memory means careless habits of study—that improving the methods of study improves the memory. There are certain practices, which if the pupil will follow, will be of service in her efforts to improve her memory.

First, there must be concentration of attention. We cannot truly study without it. The practice of trying to study with other pupils is a bad one for the attention soon wanders to some outside common interest and such study does not permit of concentration. If the nurse cannot fasten her attention on the thing to be studied when story books and letters or other interesting things are about, these things which claim attention against her will must be put out of sight. A study room has the advantage of having nothing about except the things that will help one to study.

Many pupils are apt to put off till the last minute the lesson to be learned and find that last minute taken up with some unlooked-for interruption. A most satisfactory way of overcoming this difficulty is to make out a study program, giving a definite time for study to each subject. If lived up to, this provides for the
performance of each task and gives a feeling of preparedness and leisure which the pupil cannot have if every spare moment is taken up thinking, "I should study," instead of going at it and getting it done.

That study which is left till the last minute and then done under high nervous tension, may tide one over an examination but it does not add much to permanent knowledge.

The time taken for study, and the concentration of the attention are largely dependent on the will power of the nurse, but there are certain methods of study which help to economize time and effort. When the pupil settles down to study she must first get her mind directed to the subject to be studied. This can be done by thinking over any knowledge she has of the subject. After this experience has been reviewed for a few minutes she may read the assignment through rather hurriedly to get the author's idea. During a second more careful reading the main points may be selected and organized and later memorized. With the third reading the associations should be formed between the main points and whatever of the detail is to be learned.

In memorization the whole part method is considered by modern educators to be the more economical. The pupil reads the work to be memorized from beginning to end several times, then tries to recall as much as possible. Parts which are more difficult may be given a little extra study but the pupil then begins at the beginning and tries to recall the whole. I would emphasize the fact that pupils are usually too easily satisfied and stop before the lesson is perfectly learned.

It has been found by experiment that short periods of study with increasingly longer intervals between accomplish the best results in the study of any one lesson. This technique of study will aid the pupil's memory in just the proportion that she applies it. This part of the task is entirely dependent on her, except of course as the teacher frequently points out the value of it.

There are, however, certain ways in which the teacher may help. Those things which are presented in such a way that the impression is vivid are best remembered. It is for this reason that practical procedures are much better remembered if demonstrated and that laboratory work, in anatomy, physiology, bacteriology, etc., has proved itself such a great aid to teaching.
Reason is also a strong aid to memory. We can all remember best those things which we understand. In these days of scientific educational methods, that teaching is considered very poor which does not lead the pupils to see the underlying principle of the fact being taught. Facts are, by themselves, easily forgotten but if one understands why the thing is done, the probability is that the fact will be much longer remembered.

The habit of forming right associations is a valuable aid to memory. I can well remember studying history in the elementary school purely as a memory lesson. We began at the top of the page and learned it by rote to the bottom and so on to the next, never once having our attention directed to what it meant nor why that particular bit of history came to be made, nor what sort of connection there was between it and the present. You can easily imagine how much value that kind of work was to us. Because of the failure on the part of the teacher to make associations, it was soon lost.

Now that is just what happens to nurses throughout their hospital training if they are not led to make the proper connections in their theoretical work. It is for this reason that the teacher should know what is going on in the hospital so she can direct the pupils to make the right associations.

The kind of memory the pupils use depends in a large measure on the kind of questions the teacher asks. If she asks questions that can be answered by mere repetition of the test, the pupils will study the text with that end in view. They will use practically rote memory instead of giving careful thought to the subject.

If in the study of the circulation, for example, the teacher asks, "Why is it necessary that the blood should circulate?" "How simple a system could we have and still have a circulation?" and "How do the circulatory and respiratory systems cooperate?" the pupils must think for themselves and if they are led to think in class and to expect a large share of questions that call for thought, they will put more real thinking into their study period, and as some one has said, good memory is really good thinking.

After the nurse has learned the theory in the class room she has ample opportunity to apply it. In fact much of it should be turned over into habit by repeated application on the wards.