

United States, and Canada, there is a unanimous conviction that the present nursing system, both within and without the hospital, should receive thorough revision.

For generations it has been the custom to speak in terms of veneration of the great service rendered to humanity by such women as Florence Nightingale and our own Jeanne Mance; the one devoting herself to nursing in Great Britain and on the continent of Europe nearly a century ago; the other, two centuries earlier still, accepting the dangers and vicissitudes of the Canadian wilderness that she might bring succor both to the native Indians and to her own fellow-countrymen. The lives of these two women, typify in a remarkable degree the ideal of service—service to suffering men, women and children. There is another side, however, about which we hear little. Florence Nightingale, from her vast experience, saw the inadequacy of the nursing facilities in her own country. Prompted by this knowledge, she devoted some of her time and fortune during the latter years of her life to organising nursing schools, wherein young women could receive training in the care of the sick, in keeping with the medical attainment of the time. This contribution, while it will be always overshadowed by the knowledge of her heroism and her unselfishness, yet from a practical point of view, marked a change in nursing education. So, today, when your profession pauses to consider the many problems which the great advances in medical science have created, and the markedly changed attitude of the public toward the care of the sick, you are simply following the precedent established by an illustrious member of your profession of a bygone day.

Having accepted the broad basis upon which all education must rest, namely, the gradual training of the mind and body along accepted lines, it is necessary to adapt this principle to our present problem, so that the graduate will be, not one whose mind

is crammed with fact or fiction, but one who has the resource to form judgments from observation and to think clearly and constructively when occasion arises. Perhaps you will say that this is something everyone knows. However true this may be, it is a fact, brought out in our Report, that all too many probationers reach our wards and class-rooms almost devoid of the power of observation or of reaching conclusions through a process of reasoning based upon common experiences about the sick-room.

In stating this fact, we must, in all fairness to the nurses, say that they are not wholly to blame for this situation. How often do we hear it said that all a nurse needs is a pleasant manner, a disarming smile and a sympathetic touch! We quite agree that these are invaluable natural assets, and would that every nurse possessed them in a superlative degree! This, however, is only one side of the problem.

Wherever we go, we find splendid modern hospitals, and millions of dollars spent in research foundations. Public Health, more and more, occupies the attention of the average citizen and of governments. All this vast social enterprise is created to give effect to the efficiency of modern medicine in the care of the sick. In this complicated structure, the nurse is very properly taking an increasingly important part. Is it logical, then, to believe that she alone can be inadequately trained? Merely to state the facts should dissipate, in the minds of reasonable people, any idea that in the nurse's education the fundamentals may be disregarded. We believe that in principle the nurse should differ in no way, in her preliminary education, from a candidate for any of the other professions.

Where can this preliminary education be obtained? Undoubtedly in our secondary schools, in so far as Canada is concerned. In all the provinces approximately two years in a secondary school is the designated standard of preliminary education. We have