H.—31.

THE POST GRADUATE COURSE.

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Arrangements were made this year to include as a section of this course, a training for hospital almoners; the period of training to be ten months—six months theoretical instruction combined with observation work, and concluding with four months practical work in the office of the Hospital Almoner at Wellington Hospital.

Hospital Boards were circularized informing them of the advantages of such an officer with special training, and pointing out the necessity for the careful selection of any intending applicant as personality would play an important part in establishing a new service.

Fourteen nurses are attending the course this year—nine taking Hospital Administration and Teaching and five Public Health Nursing—but there are no students so far offering for the Almoners' course.

PROBLEMS FOR THE FUTURE.

The Training of the Maori Nurse.

During this year, partly owing to one or two typhoid epidemics, there has been a certain amount of publicity in regard to the health needs of the Maori people. Demands have been made for—

(a) Hospitals or hostels for Maoris only;

(b) The training of more Maori women as nurses.

Hospitals for Maoris would only immediately raise a racial bar which the Maoris themselves would be the first to resent. On the whole the old antagonism to hospital treatment, though still existing, is gradually disappearing, and another generation should ensure complete absence of this prejudice against existing hospitals.

The training of Maori nurses is a different problem. It is only fair that Maori girls who have prepared themselves should be given an opportunity to equip themselves to assist their people, but certain conditions must be faced. In the first place these girls must be carefully selected—they should be of good family and have received a good secondary education in addition to being of a quiet, steady personality.

The arrangement in existence between the Hukarere School and Napier Hospital is a very suitable one. The girls remain for a year resident in the school and attend the hospital for eight hours daily. If at the end of the year they are regarded as suitable, they are taken into the hospital to train in the usual way, the year in the school counting as three months of the period of training.

Unfortunately in other localities there is not the provision for an arrangement of this kind.

Having commenced training the Maori needs special consideration and understanding by her tutor and ward Sisters. For instance, she frequently thinks in Maori, and therefore is slower in grasping new instructions—and when she does think in English it must be remembered that her background of experience is often very different to her fellow nurses. The next problem comes when she is qualified. She leaves presumably "to work among her people," but this is not possible until she has gained experience in accepting responsibility and exercising authority; this she can only acquire in an institution. Next, her own people cannot pay her, and she has no standing among them unless she is in the employ of some public body with the authority of that body behind her.

It is unjust to train Maoris unless we are prepared to employ them after registration in our hospitals. In addition, before they are suitable to work by themselves it is essential that they also should have a full obstetrical training.

DOMICILIARY NURSING SERVICE.

In the Wellington district during the year a very satisfactory agreement has been made for the care of early discharged cases, and for the home conditions when bearing on the welfare of the patient, by District Nurses through the Almoner's Office at Wellington Hospital. The Almoner visits the wards every day and gets from the ward Sister the names of patients about whom it is necessary to make inquiries, and in the same way the District Nurses have one person to refer to who can obtain the necessary information for them in regard to changes in treatment for their patients, or, if medical attention is required on the district, who can make the necessary arrangements. There is no doubt that many patients can be cared for in their own homes provided there is a competent service, and at the same time much useful information bearing on the patients' condition can be obtained for the use of the doctor if a system of this kind is in operation. Some hospitals have done much more than others to develop a service of this kind, but there is no doubt that with better organization its possibilities are enormous and it has much to commend it to every Hospital Board.

THE TRAINING OF NURSES.

Recently in New Zealand, as in other countries, the whole question of our present system of training nurses has come under criticism. Some authorities are advocating the university training of a nurse along the lines of a medical student. Whether this is entirely sound is questionable for many reasons. For instance, immediately arises the question "How is the ordinary nursing service of our public hospitals to be maintained?"