

SHE RACED CARS AT BIARRITZ —

But "Once A Nurse, Always A Nurse"

(From an article in "London Calling" by Irene Neville, formerly of Christchurch)

WHEN the war came, it found me in Biarritz as a racing motorist. I came back to Great Britain straight away—anxious to link up with a New Zealand unit of some sort, either as a motor transport driver, or as a nurse. I really wanted to drive most, since I'd been racing some years, and I felt by then it was my job; but at that time, at the beginning of the war, the driving jobs were filled first by younger women. So then I turned back to nursing—not without a lot of doubt in my mind—as I hadn't nursed for fourteen years. But I knew I must do something, so I made inquiries. The Ministry of Health was then forming the Civil Nursing Reserve, a war-time emergency service to supplement the staffs of general hospitals, to provide local authorities with nursing personnel for their first-aid posts, and to staff casualty trains and convoys. I thought that sounded like my sort of work. So off I went for an interview. Before I knew where I was, my application was accepted and I was sent off to an emergency hospital in Buckinghamshire.

Once a Nurse—Always a Nurse

Again I was full of doubt, but when I confided in the matron, and suggested I should begin as an assistant nurse, she encouraged me by saying: "Once a qualified nurse—always a nurse." So the next morning I reported at 7 a.m. at one of the huts, as Staff Nurse, and I felt just the same as the day I began as a probationer at the Wellington General Hospital nearly twenty years ago. Just the same trepidation—wondering whether I'd made the right decision—but I was amazed at how quickly I settled into the job and found I could do it—simply because it had to be done. This emergency hospital was a rambling sort of place in the grounds of an old people's home; the operating theatre and X-ray

were in one wing of the institution itself, and each ward was a hut built in the grounds in the most modern fashion, and with a kitchen in each ward. We nursed Tommies there—just ordinary routine hospital nursing—putting feet straight, accidents, influenza.

And then suddenly it all changed. In the September of 1940 we lost our soldier patients overnight and filled up with convoys of blitz-injured civilians from London hospitals. I learned many new treatments there—one of them was an improvement in the treatment of compound fractures. It was called the "Trueta" treatment after the Spanish doctor who used it first in the Spanish Civil War.

After some experience at this emergency hospital with air-raid patients, I was transferred to London—still with the Civil Nursing Reserve—to supervise the health arrangements of evacuees from Gibraltar. Hotels and blocks of flats were commandeered to make hostels for the 9,000 British subjects from Gibraltar—mothers, wives and children of the men in the Civil Service, and of men fighting there. I was in charge of the sick bays at one of these hostels. The most difficult part of it was helping the evacuees to adjust themselves to a different climate and to the conditions that arise from such a difference. New diets and vitamins were necessary. I had to supervise their food, anticipate disease, and to advise on the feeding of the babies. Only a few of these Gibraltarians could speak English—they speak a kind of Spanish dialect—so that made it a little more difficult. They were very attractive, jolly, singing people, and the children were learning English well by the time I left last year.

In the Shelters of Dover's Cliffs

And then I went to tackle still another new job in Dover—the Hellfire Corner of the Kent coast. Here I supervised the health side of the construction of deep

shelters. They were made out of caves in the white cliffs themselves—caves that were used for the same purpose, I believe, in the Napoleonic Wars. In peace time they were used as wine cellars and some were objects of sightseeing tours.

In this war, engineers were called in to convert them into warm, dry, air-raid shelters to protect the people of Dover from constant shelling and bombing. The caves were lit, plumbed, and hot pipes installed to prevent dampness caused by condensation. The pipes served to warm the shelters, too. Each shelter has a medical aid post—as modern as any hospital surgery. At certain times the sirens were continuous—when they went, I never knew whether it was alert or all clear—and it didn't really make much difference. So the shelters were always full. Some people actually moved in to live after their homes had been destroyed, and stayed until new ones were found for them. Working men came there to sleep—it was the only way they could get enough rest to be ready for their jobs next day. Of course, thousands of people were evacuated from Dover, but thousands were necessary to remain to carry on the work of the town.

The Epidemics Didn't Happen

So in these famous deep shelters it was my job to watch the general health of the shelterers, to gain their confidence, so I could help them with private worries, and their health ones, too. They were distrustful at first and felt a bit as though they were being spied upon; but they got used to me when they found out I didn't want to spy and run their lives for them, and then they became more friendly. But the epidemics we were looking for didn't happen—in fact, the children seemed to thrive.

I remember one good humoured remark I heard about myself as I was hurrying through on my rounds. I'd been delayed that night, so didn't have time to stop and chat with a couple of old ladies who'd been waiting for me. As I bustled by, I heard one old dear say to the other: "Huh! Even the Queen stops to speak to yer."

Welfare Work in a Factory

After Dover I still felt I wanted fresh experience—I had so much to learn—so I took the job of sister-in-charge of an enormous factory of 3,000 employees. Welfare work as well as routine nursing. This was the most interesting of all, and the work I'm most interested in. The care and observation of workers, to prevent illnesses and disease developing, is a new field open to nurses. And nowhere is this prevention more urgent and important than in industry, with its enormous expansion and increasing inclusion of women. The Ministry of Labour,



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"... Nursing is no longer a drudgery vocation"

through Mr. Bevin, has made it compulsory for all industrial undertakings of any size to have a medical and nursing service. They realise at last that an increase of production for war depends largely on the health and general welfare of each worker. There is research to be done, to find causes for absenteeism, for small illnesses, for mal-adjustment to the work of a particular factory. In my factory a great number of girls came to me with acne—that nasty skin disease which was spoiling their appearance. That set me looking into their diet. I found they were mostly eating chips and vinegar for lunch. I tried to find out why. Was the food in the canteen too expensive for them? Or was it badly cooked? I made my report to the general welfare officer. When they came to me with toothache I gave them temporary relief, but examined their teeth and packed them off to a dentist if it was necessary. This general supervision and advice is a service which much continues after the war is over. It is one of the services to make us an A1 nation.

I enjoyed my work in that factory, and now I'm awaiting still another call: "Nurseries for under fives." As more women are needed, and used, in industry, the need for more and more day nurseries increases to look after their small families. The nurseries may be residential or non-residential, or just day nurseries.

So my old W.G.H. training has stood me in good stead. Nursing may no longer be rated as a drudgery vocation. It has been versatile and exciting during this period of "comeback" and may at any time offer even wider and newer scope for the girl who begins her training now.



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