

With a Common Purpose

by Helen G. McArthur

Under this title we publish an article by Mrs. W. E. Watson who, as Helen G. McArthur, OC, B.Sc., M.A., LL.D., was awarded the Florence Nightingale Medal by the International Committee of the Red Cross, at Toronto in 1957, when National Director of Nursing Services of the Canadian Red Cross Society.¹ In 1971 she left the post which she had held for a quarter of a century.

She recalls some of the events in a life devoted to service, in which experience led her to a broad outlook on the Red Cross and the practical application of its principles. She played an important part in the international sphere and was one of those outstanding figures who, in various countries, have made the nurse's position better known and rendered training in the care of the sick more effective.

We are particularly glad to call upon a recipient of the Florence Nightingale Medal to express herself in this issue of the Review, which is partly devoted to that high biennial distinction which the ICRC bestows on nurses in recognition of exceptional service rendered in the course of their career. (Ed.)

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¹ Up to this year, eleven Canadian nurses have been awarded the Florence Nightingale Medal.

I have been invited, in 1971, at the time of my retirement, to write an article to the *International Review*. It has taken over two years to gain sufficient perspective to carry out the assignment; for the thousands of incidents to settle into highlights of experiences in that capacity. I, at first, thought that I had to sort out my activities during the period as a full-time Red Cross nurse and the events which occurred when acting as an officer of my professional organization, the Canadian Nurses' Association. It was only when I recognized, in retrospect, that the two were irretrievably interwoven that I could begin to outline the tapestry of my life during those years. It was the common purpose of the two roles that made the time so fulfilling. To paraphrase the words of a Roman philosopher, "So far as I am an individual, my country is Canada; so far as I am a Red Cross nurse, I am a citizen of the world". The International Red Cross mapped the road I was to travel as well as serving as a backdrop to all that was to come.

Several ways to organize my many memories presented themselves. I have chosen to relate my thoughts¹ to the Red Cross principles that clearly motivated a great proportion of my actions; not an original idea since the late Dr. W. S. Stanbury, then National Commissioner of The Canadian Red Cross Society, had used the technique in a memorial lecture² to the Canadian Nurses' Association on the occasion of their 50th anniversary celebrated June, 1958. Dr. Stanbury's presentation was somewhat in reverse to mine—he related the nursing profession to the Red Cross through the Red Cross principles and called his paper "Our Common Heritage".

Humanity

At the onset of my times with Red Cross I set out to learn about those I would serve. Within the borders of my own country I found a mosaic derived from settlers who had come from many lands with differing cultures. They had retained that which they treasured in their homelands without diminishing their pride in being Canadians.

¹ International Committee of the Red Cross, *Rights and Duties of Nurses* (under the Geneva Conventions, August 12, 1949) Geneva, The ICRC 1969, p. 5-6.

² W. Stuart Stanbury, M.B.E., B.A., M.D. Our Common Heritage. *The Canadian Nurse Journal*, vol. 54, No. 10, 1958.

To some degree, learning about the needs and resources of Canadians prepared me for the broader international scene I was to visit some time later.

The first opportunity to go abroad came as a representative of the Canadian Nurses' Association at a board meeting of the International Council of Nurses in Brussels. At that time I was afforded the privilege of visiting the headquarters of the League of Red Cross Societies and those of the International Committee of the Red Cross in Geneva. In addition, brief visits were arranged to the Red Cross Societies of France, Belgium, Denmark, Norway and Great Britain.

I quickly became aware of the significance of a statement by Judge Sandstrom, a past chairman of the League of Red Cross Societies: "Red Cross is a manifestation of principles and sentiments above the divergencies which divide". At the same time I became aware that nursing was in fact practical democracy, a living example of that ancient gospel, "Love thy neighbour as thyself". Nurses of the world had taken this personal philosophy beyond the bounds of home, community, the frustration of language and the conflicts of political ideologies, and were making it work on the international scene through the oldest professional organization of women, the International Council of Nurses.

Impartiality

At the time of the 100th anniversary of the Red Cross idea, the International Red Cross Nursing Study Centre, at Lausanne, was held. It pleased me to attend with Dr. Helen Mussallem, the Executive Director of the Canadian Nurses' Association, who was acting in the dual capacity of representing the nursing profession of Canada and as a member of the Nursing Advisory Committee of the Canadian Red Cross Society. We both shared in the study centre activities in our own way. We were soon to become aware of how fortunate we had been that the great wars had not been fought within the borders of our country. Canadian nurses therefore had not, unless members of the armed forces, been directly touched by the full meaning of the Geneva Conventions and the application of the Red Cross principles in time of war. At the study centre,

attended by nurses from around the world, we were deeply moved by the experiences of nurses who had struggled with the difficult task of commands of the Geneva Conventions and the Red Cross principles. We came to recognize that it was no easy task to serve in wartime when an individual's personal national loyalties could, at times, be in conflict.

Nevertheless, each of the nurses at the centre accepted the basic tenet "That all who need care shall receive care without delay"; there could be no friend or foe if the Red Cross principles and the Geneva Conventions were to prevail. The organized profession also accepted these formal statements at a meeting of the International Council of Nurses in 1965. Thus, I was vividly confronted with the true meaning of the Red Cross principle, "Humanity".

Independence

Early in my Red Cross career I was aware that the pioneer philosophy was the basis for the activities of a voluntary agency; that is, to demonstrate how to meet needs before the government has sufficient public support to establish such services with tax moneys.

The Canadian Red Cross Society has been fortunate in the distinguished nurses who have served as volunteer officers of the Society—as honorary advisers in nursing and chairmen of the nursing committees. In the forefront were well known personalities such as Jean I. Gunn, E. Kathleen Russell, Florence H. M. Emory, Helen Carpenter and Alma Reid as advisers to the Society and to the Director of Nursing Services. I was fortunate to serve with three of those mentioned although most of my term was with the wise counsel and support of Dr. Emory. We developed many programmes initiated to meet the needs of nurses and their clients or patients.

The first such project was in 1946 under the leadership of Dr. E. Kathleen Russell. For four years the Canadian Red Cross financed the Canadian Nurses' Association to enable them to conduct a demonstration school of nursing with the primary purpose of displaying the principle of educational independence as a means of improving the quality and quantity of nurses to serve the Canadian people. The evaluation of the demonstration proved that, with

independence from the service needs of a hospital, nurses could be prepared with the available resources in less time and thus in greater numbers. In the past, the apprentice system had been a financial asset to hospitals, and it took several years for the pattern to be emulated extensively. Fortunately, before I retired the principles of this demonstration had been generally accepted throughout Canada.

Later a plan to provide bursaries and fellowships for graduate study at the master's and doctoral levels was administered by the nursing department. The awards served as an example for other sources of financial assistance to individual nurses. Qualified nurses were enabled to pursue advanced studies in special fields of nursing or related fields such as education. In later years the emphasis was on preparation for research in order to assure on-going foresight and independence from the generally accepted patterns.

The Nursing Advisory Committee of the Canadian Red Cross did not confine itself to nursing education. Studies and projects were also developed to improve nursing service. For example, the Outpost programme established one-nurse centres and small hospitals in sparsely populated, outlying communities without nursing care of any kind. Over the years from 1920 to 1970 more than a hundred communities received Red Cross assistance until such time as they could finance and administer their own health services. This usually occurred when the hospital grew to over 20 to 25 beds with a relative increase in population which created the need for larger hospitals. A fully staffed and operating unit was presented to the community and Red Cross, freed in one area, turned to another unserved community.

The nurses who served in these small, often isolated centres were true pioneers. They demonstrated their willingness to weigh the value of rural experience against the more comfortable but often circumscribed life of a nurse in a large city hospital. The demands on their time and energy were always great, but the rewards to the spirit usually greater. Similarly, satisfaction was felt by the one-nurse national nursing department which carried their experiences from one to another, and attempted to make a widely scattered nurse population feel part of a great team, both nationally and internationally.

Voluntary service and neutrality

The National Director presented opportunities for nurses to develop a broader vision of Red Cross through service in times of disaster at home and abroad.

At home : Thousands of nurses, in addition to their full-time nursing positions with a wide variety of agencies, both official and voluntary, acted as volunteer nursing advisers, committee members and teachers of home nursing as well as supervising programmes such as the sickroom equipment loan service, to carry out adequate home care of the sick.

Volunteer nurses taught thousands of lay women to care for their families in sickness and health, and at the same time prepared them to serve their communities in times of disaster.

Abroad : With the support of their employers, nurses volunteered through the Canadian Red Cross Society to serve in disaster areas throughout the world. Over the twenty-five year period great disasters, both natural and man-made, occurred. The special skills of well qualified nurses were utilized in Holland, Great Britain, Austria during the Hungarian events, the Congo, Morocco, and Korea. For the majority of disasters it was necessary to have skill in providing the right nurse or nurses to meet the particular disaster situation; i.e. public health nurses to refugee camps in Austria, and highly qualified surgical nurses for the care of the Agadir victims in Morocco.

Only to Korea was the National Director sent to do the work personally. The late Dr. W. S. Stanbury, speaking to Canadian nurses, said of this assignment: "Working under far from ideal conditions, she was able to assist not only in rebuilding the Korean Red Cross Society, but also in raising the status of nurses, and in fact of all Korean women struggling to make a contribution to the public welfare of their country". There was no doubt that Red Cross principles of neutrality and voluntary service applied together made nursing service available, no matter how diverse the cultures or the types of disaster.

Universality and unity

Unkind people might say that Red Cross nurses are nosy people, sticking their noses into every man's business. This might be excused when it is understood that the adaptability of the nurse is the reason. Opportunities to serve the young through Red Cross Youth are many and varied; opportunities to work with senior citizens have increased; work with Homemakers to care for distressed homes and the Blood Transfusion Service are just some of the fields open to the nurse in the Canadian Red Cross. Each of these activities could provide an article in itself. Suffice it to say that the National Director of nursing services had to develop a lively ambivalence to correlate the hours available in the day or for that matter in the year, in the face of the many situations that presented themselves for coordination and consultation at the national level. Certainly life was never dull.

Service with Red Cross became even more exciting when the opportunity arose to become a member (and later, chairman) of the League of Red Cross Societies Nursing Advisory Committee. Here one soon felt the impact of the principles of universality and unity. Although the pilgrimages to Geneva every two years to meet with world nursing leaders were most rewarding, it may be a sign of my provincialism when I record that the finishing touch on my Red Cross career was when I played hostess to Miss Anny Pfirter, of the ICRC, and Miss Yvonne Hentsch, of the League, at the same time, in my own country. Even more satisfying was the fact that it was at the time of the International Congress of Nurses held in Montreal in 1969. Here the common purposes of the organized nursing profession and the Red Cross were vividly portrayed.

Conclusion

It is, of course, impossible to outline the multitudinous activities that a national director of Red Cross nursing can be involved in over a quarter of a century. A review of the medal box hanging on the wall demonstrates the recognition, not of one but of thousands of nurses serving mankind at the community, national and international levels.

Of all the awards, it is perhaps the Florence Nightingale Medal received in 1957 that is most treasured. The nomination was surreptitiously handled by the Canadian officials so that the recipient could not know and protest that others were more worthy. An award specifically for nurses is special, particularly because in Canada nominations were from the names of those who served in a field broader than the circumscribed terms of reference for their positions. In my case eighteen months in war-ravaged Korea was the final argument for such a distinction. At that time in no way was I ready to retire on my laurels. Rather, it took me another fourteen years to realize that the future was opening up to new challenges so vast that it was desirable to turn the reins over to a new leader. Mrs. Nicole Marchak, my successor, displayed the qualities needed: youth, courage, university preparation, bilingualism in the two languages of the founding fathers of Canada, to cite a few. We switched horses in midstream with activities flowing in all directions—unfinished publications and programmes and many visions of unexplored areas deserving the attention of Red Cross nurses. Periodic evaluation of activities to weigh their relevance to the present-day setting has always been the rule in Canada, but now in addition there had been a more extensive survey by the Canadian Red Cross Society to ascertain the effectiveness of all Red Cross activities as well as nursing in Canada. “ And Who is my Stranger ”, a report of the Long Range Planning Committee was published in 1973. It confirmed the wisdom of fresh new leadership.

I had relinquished the reins with no regrets. Allan Gregg said “ ... to the promise, to the beauty and to the power of incompleteness. If you don't have it—you're through ”. I have it in a new way of life, while my successor has it in unlimited quantity. The story of Red Cross Nursing will be ever new and satisfying to all who play a role in its services.

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