



# The *Great* Canadian Catholic Hospital History Project

Documenting the legacy and contribution of the  
Congregations of Religious Women in Canada,  
their mission in health care, and the founding and operation of Catholic hospitals.

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# Projet de la *Grande* Histoire des hôpitaux catholiques au Canada

Retracer l'héritage et la contribution des  
congrégations de religieuses au Canada,  
leur mission en matière de soins de santé ainsi que la fondation et l'exploitation des hôpitaux catholiques.

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Visionaries

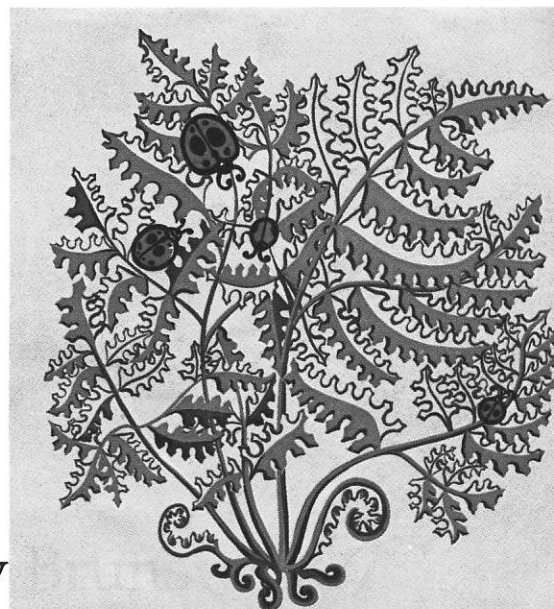
# The Visionaries 1916-1991

By  
Arlee Hoyt McGee

MAISON PROVINCIALE N.L.A.

Edited by  
George Bergeron

Nurses Association of New



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**Cover photo** is of Elizabeth Innes, pioneer nurse who worked in the Saint John, New Brunswick, area during the mid 1880s. She left important early records of her work.



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# Preface

**T**here are advantages and disadvantages when one relies only on records or only on oral history to tell the story of nursing. There are also limitations when relying on the sanitized information so often included in accounts written by nurses. The ensuing history of professional nursing in New Brunswick attempts to connect memory, knowledge and historical data. The selection process for materials, hand searched in a brief time frame, was the same as for most historical writing — the value judgements, words, topics, people and events are the author's choice.

The pronoun "she" is used to refer to nurses because women represent the largest percentage of caregivers. Nurses Marilyn Brewer and Nancy Rideout assisted by reading the manuscript. Appreciation also goes to Association members, provincial office support staff and to George Bergeron, manager of public relations and information.

The joy and honor in compiling this book to commemorate the 75th anniversary of the Nurses Association of New Brunswick is founded in my understanding of the importance of the preservation and utilization of nursing's rich history, particularly in relation to the position of women in society. I hope that this little account will not only be read as history for history's sake. I hope that it will be read philosophically, with each reader sifting through the information, making connections and filling in the blanks with fragments from their own memory. It is my belief that nursing history should be returned to nurses, their schools of learning and to the public, where important questions will be asked about the historical factors that shaped nurses lives and the direct bearing these will have on what happens to nurses and the choices they make in the 21st Century.



Arlee Hoyt McGee, November 1991

# APPLICATION CARD

NEW BRUNSWICK ASSOCIATION OF GRADUATE NURSES

Name, *Margaret L. Mae Dowell*

Address, *Tennfield Ridge*  
*Charlotte Co. N.B.*

Training School, *General Public Hospital*

Address of Training School, *St. John, N.B.*

Term of Training, *Two years*

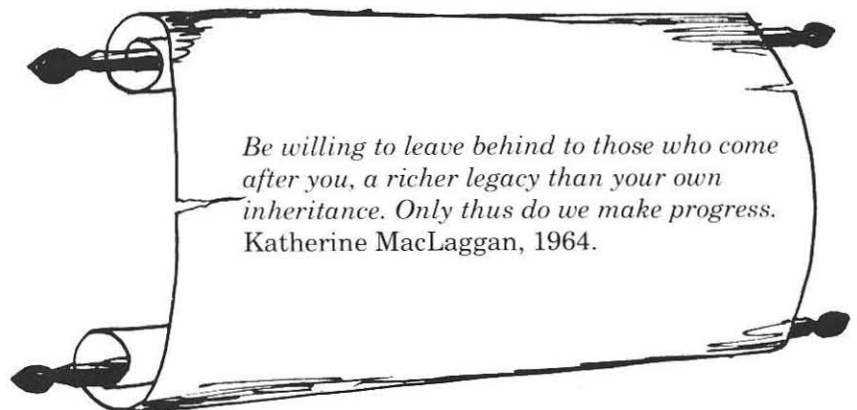
Date of Graduation, *July 17, 1920*

Signature of Lady Superintendent of Training School, *Maudie E. Ketalick*

Post Graduate Courses or additional experience.....

Date of application, *July 17, 1920*

# Beginnings



*Be willing to leave behind to those who come after you, a richer legacy than your own inheritance. Only thus do we make progress.*  
Katherine MacLaggan, 1964.



Julia Purdy, Matron of the General Public Hospital, Saint John, 1888-1890.



Amanda Viger, Nurse Pharmacist, Hospitallers of Saint Joseph.



Sister Dorina Frigault in her museum at Tracadie New Brunswick.



**I**t is now 349 years since Jeanne Mance, the first lay nurse in North America, founded the Hôtel-Dieu Hospital in Montreal. Since that time, nursing has been a reflection of the beliefs, mores and culture of our Canadian society. Knowledge of nursing history makes a difference in how nursing is understood. New Brunswick's nursing history, of which each nurse is a contributor, is a testament to audacious pioneering efforts reflecting the Province's unique heritage. Throughout those early years, men dominated the medical establishment while women delivered babies, cared for the sick, promoted health and helped the dying. Their work was inconspicuous and without fanfare, power or status; this brand of caregiving was the foundation of professional nursing in New Brunswick. But contrary to common belief, nurses were not handmaidens. History has corroborated this. Consider the commitment, responsibility and contribution of the following caregivers:



- In a slanted script written in a diary housed in the New Brunswick Museum, Elizabeth Innes describes the nursing care she provided to civilians, sailors and soldiers in the city of Saint John long before the influence of Florence Nightingale. At a time when medicine helped to set bones, pull teeth and amputate, supportive nursing care was given by New Brunswick women with the back-up of mother nature.



- When the first hospital opened in Saint John (1865), hospital beds cost \$3.65 each. The first matron ordered twenty-four beds, twelve night-shirts, three screens, and a board for carrying patients. Her duties included taking care of household goods, the furniture, wards, beds, clothes (anything that had to be cleaned) and visiting the wards twice a day distributing food, and obeying the hospital superintendent.

- Until the mid Nineteenth Century, there was no defined nursing profession in New Brunswick. Lay nurses and midwives were relied upon to aid pregnant women and the sick. Between 1868 and 1873, religious sisters became active in the Province. Amanda Viger, and others, were the early pharmacists who used skills brought with them in their journals from the Mother House in Montreal. Sr. Dorina Frigault, former director of nursing at Hôtel-Dieu St. Joseph Hospital, made a lasting tribute in the form of a museum that preserves the memory of the religious order of the Hospitallers of Saint Joseph. These women developed their nursing practice by helping lepers in the Lazaretto, which operated in Tracadie from 1868 to 1965. The healing skills of Sister Saint Jean-de-Goto earned her a province-wide reputation.



- One year after the 1887 Health Act, which established a Provincial Board of Health in New Brunswick, training began for nurses in hospital-based schools. Nurse Alberta V. Hanscome's *History of the Saint John General Hospital and School of Nursing* provides a description of the accountability of hospital nurses during that period and up until 1954. The visiting Commissioner for 1902  
ed: *One nurse, and a probationer, had to look after twenty-one patients, do the dressings, wash all the dishes, sweep and dust the ward, bathroom and water closet.* The Commissioner's recommendation for ward maids to do this work was carried out twenty-five years later.



- Unsanitary conditions were rampant in 1895 when Agnes Carson became the first visiting nurse in the City of Saint John. She earned \$175 per year and paid her car fare. In 1897, when hospitals were viewed as places for the chronically ill, the Victorian Order of Nurses (VON) started their nursing service in Canada.



Muriel Hunter, Director of Public Health Nursing Services 1942-1964, Province of New Brunswick.



New Brunswick Red Cross Nurses (left to right) Jean Sweet, Genevieve Eaton, Alvina Pinet, Mel Beyers and Gladys Mason.



Presentation of an Honorary Membership to Edith Branch Pinet by Sr. Ernestine LaPlante (right) and President Anne Thorne (left), 1980.

In 1919, the VON staff in Fredericton consisted of a Miss Patterson. Using a bicycle for transportation, she took health care into the homes of citizens and made 187 visits in her first six weeks of employment. She cared for the elderly, infirm and newborn and set up school health programs. The Victorian Order of Nurses initially pioneered essential health services in New Brunswick communities and helped organize and reform public health services across the Province.



- The New Brunswick Public Health Nursing Service was established in 1921, within the framework of the three-year-old Department of Health. The first director Harriet Meiklejohn had a dream ... *to place as rapidly as possible, one public health nurse in every town in New Brunswick* .... The nurses, much fewer in number, directed their efforts towards infant welfare because 135 out of every 1000 infants died before they were one year old. By 1941, infant deaths had been reduced to 76 per 1,000 live births. Reports by Public Health Nursing Director Muriel Hunter, who developed health co-ordinated nursing services in New Brunswick in 1942, show the challenge of nurses facing climates that did not favour healthy behaviour and the nursing attention given to school children and families along every country road in New Brunswick. For thirty years Ray MacKenzie was a familiar sight in homes and schools along the Saint John River Valley, and in Westmorland, Albert and Kent Counties. An ambassador of goodwill in the community, she was awarded the "Breath of Life Award" for her work with children suffering from cystic fibrosis.



- Personal memoirs and statistics in *Red Cross Outposts in New Brunswick (1922-1978)* outline the experiences of nurses who worked under hardships and isolation to provide

professional medical services to communities that normally would have been deprived of them. They travelled to their patients by snowplough, snowshoes, horse and wagon, dingy, pumpcar and jeep. Jessie Murray, of the St. Stephen region, was one of the first Red Cross nurses to practice in New Brunswick in a public health capacity. From Shippagan to Deer Island, nurses in small hospitals and nursing stations, which were sometimes located in their own homes, responded to needs and kept society flexible during times when necessities and resources were scarce. Genevieve Leighton Eaton is testimony to forty-five years of nursing services provided to both sides of the border from the Fundy Isle of Campobello. Thérèse Arsenault (Fournier) of Bathurst won the Dow Award in 1949 for her courage and devotion. When ill herself she travelled to Miscou in a blizzard to help a patient with a difficult confinement.



- Stories written about Edith Branch Pinet, recipient of the Order of Canada, tell of her hands-on nursing care that, for many years, sustained and improved the quality of life of the Acadian population along the northeastern shore. Because of a lack of physicians, there was no resistance to midwifery and Edith Pinet delivered hundreds of healthy babies.



- The literature makes scarce note of the role of minorities in nursing. A history of the General Public Hospital in Saint John records that the board hired John McCredie as the first nurse, at the rate of \$20 a month. Mary Burns, the first female nurse hired, was paid \$5 per month. There is little in NANB's records of the contributions of men to the care of the sick. Minutes of the NBARN's executive council, 1941, express the Association's lack of authority to grant a request from a male nurse asking for the same military rank as female



Katherine MacLaggan's leadership role helped create a University School of Nursing at UNB, Fredericton.

nurses. In 1947, a committee on the "Male Nurse Questionnaire" concluded that ... *if they had the same qualifications and training as female nurses, males would have to be considered on the same basis.*



- One hundred and six years after Florence Nightingale wrote *Notes on Nursing*, Dr. Katherine MacLaggan, Fredericton, the first New Brunswick nurse to receive a doctorate of education, wrote *Portrait of Nursing*, a plan for the education of nurses in New Brunswick that would change thousands of lives. She lived to see the evolution of schools of nursing from hospitals to universities. Dr. MacLaggan's strong belief in the need for a second language is recorded along with her passionate ideas about nursing education: *New Brunswick's future French and English together lies in economic and social reform.* She designed and participated in a unique health education program for French and English student-teachers that allowed her to teach them health and, at the same time, help with their personal health problems.



- Natalie Solomon-Grey, R.N., operating room nurse, formerly with the Medical Services Branch, Saint John River Reserve, worked with and for her Malecite people through the first professional Indian organization in Canada — The Indian and Inuit Nurses of Canada. Lisa Dutcher and Shelly Francis were the first New Brunswick Indians to enroll in bachelor of nursing degrees at UNB, Fredericton. As they pursued their education in 1990 to assist them with the health care of native families, the Nurses Association of New Brunswick began work with an Indian band on self-governing health care.

- Eighty-five-year-old Mary Christina "Chrissie" Slipp, night nurse supervisor and neighbour, was given the Rotary Club's highest honor in recognition for the impact that she had on her Woodstock community. She gave her nursing talents long before Medicare. Chrissie also operated the Red Cross Loan Cupboard, worked for Meals on Wheels, served on the VON board of directors and helped the needy. By 1991, many nurses were speaking out collectively on healthy public policy for New Brunswickers.



- And in 1981, following the example of their foremothers, many New Brunswick nurses became involved in a program of Extra-Mural Hospital care. Simone Comeau-Geddry is currently assistant executive director and co-ordinator of patient care services. Jackie Steward and Mary Holland, former directors of nursing in the then fledgling Hospital, helped lay the foundation for an expansion of home services in the areas of palliative and extended care. Statistics cannot convey a nurse's spirit of adventure, her resourcefulness, and her understanding of humanity. Other than Florence Nightingale's reform, nursing's contribution to society remains vague. Sexual stereotyping has done the nursing profession a grave injustice. A detailed history of the Association representing New Brunswick's nurses — the improvement in their educational and professional status, and the impact of gender — has yet to be written. A traditional account such as this, establishes critical chronology, recognizes prominent players and directs attention to important transitions. It helps us to think about caring, who the caregivers are and what their fantastic achievements were.

The Nurses Association of New Brunswick's (NANB's) story can be found in the Provincial Archives and in the library of its head office — in the Association's newsletter and magazine, bulletins, and in reports of the board of directors bound in black covers with gold lettering. The feelings of nurses are embedded in the arcane language of the minutes, sometimes written in the nurse's own script. Documented with care to avoid personal points of view, these records nevertheless give glimpses of private thoughts. Compassionate phrases tell of the illness or death of one of their members. There are warm words for the dedicated, joyous expressions of progress, and frustrating pronouncements when things have not gone well. These chronicles understate the nurses' value in tidbits and triumphs, commitment and concentration. The first fifty years of the New Brunswick Association of Registered Nurses (NBARN) — this is what the Association was called before 1984 — was published by its public relations committee for the Golden Anniversary Meeting in 1966. In 1991, the three-quarter mark, there is much more to tell from the nurse's perspective, her angle of vision.

Now called the Nurses Association of New Brunswick (NANB), this organization has an interrelated world view but retains its own peculiarities of law, language, politics and gender. History, geography and economic forces have placed a certain strain on New Brunswick nurses. Those who are nurse-friendly, in government, in universities, in hospital bureaucracies and among the public, know that nursing is a demanding profession. Nurses are used to rowing against the current in their efforts to maintain professionalism, nurse the family and foster the aims of community. Their bold initiatives make individualism costly mentally, politically and socially but through their Association they need not stand alone.

From the outset, New Brunswick nurses have had one vantage point. Chiefly women, they were accustomed to assessing the health needs of people in the home setting. They knew who needed care and how to give it; their nourishing

nature permitted them to do it well. At a time when there were serious discrepancies between rural and urban areas, when there was no minister of health (there was a provincial health board with twenty-seven districts), when sewage disposal was a major concern, when diphtheria and typhoid were rampant, a small group of nurses had the insight to see the value of their collective action.

Three classmates of the General Hospital in Saint John — Melissa Brown, Ada Burns and Gertrude Williams — met often to discuss nursing problems and ideas. In 1903 they invited other nurses to help them organize a Society. Miss F.L. Stewart became president of the first Nurses Society in the Maritimes. There were sixteen charter members. Saint John Doctors J.M. Scammell and T. Dyson Walker gave them help. The Society established a registry of qualified nurses from their school and set up a Sick Nurses' Benefit. For sixteen years, nurse Hattie Hunter managed an oxygen business that serviced the entire Province until 1920.

After six years of activity and confining its membership to graduates of one hospital, the Saint John General Public Hospital Nurses' Society spurred the movement for organized nursing in the form of the first Graduate Nurses' Association. In January 1907 the Local Council of Women, with whom they affiliated, was authorized to assist in the work of obtaining a Dominion registration for nurses. In March 1909, a meeting was held for all nurses in Saint John to discuss the formation of an organization that would respect the equal rights and privileges of graduates of all training schools. The alumnae of the Saint John General Public would continue with its own distinct Association.

On April 29, 1916, a point in history when women in Manitoba earned the right to vote provincially, six nurses travelled to Fredericton to meet with the Co-operation Committee. The nurses wrote that they ... *dreaded the meeting but were treated with such courtesy that we quite enjoyed it. The only opposition to our Bill was a doctor, from Woodstock.* The first act for nurses in New Brunswick contained the names of

forty-two graduate nurses. New Brunswick became the third province in Canada to enact nursing legislation, preceded only by Nova Scotia in 1910 and Manitoba in 1913. Arthurette Branscombe was elected president of the group of nurses who obtained the act. She signed the bill to incorporate "The New Brunswick Association of Graduate Nurses" (NBAGN). In their exertion of the right to regulate themselves, nurses had a vision which had the health of a province as its primary focus.

Visionaries, nurses whose names are forgotten, left much evidence of their being. They spent countless hours around the board table establishing policies for their long-range planning, mapping and inventing ways for nurses to determine the shape, focus and future of health care in their communities. In 1924, they legally became the New Brunswick Association of Registered Nurses. This governing body helped nurses survive and flourish while maintaining those things essential to the people in their care. Unanimous approval was not always forthcoming, but the will of the majority of the membership prevailed.

Written accounts of caregivers related that women entered the system and began their practice with the expectation of doing good for society without thought of rewards. The Nineteenth Century philosophy of selflessness was evident and nurses in New Brunswick learned to devote their energies to helping people. They instinctively reacted to the needs of others — there is no forgetting this beginning. Each community had its volunteer nurses. They responded to the call, both in the public and private world, influencing change in the homes through religious persuasion or altruism rather than authority. As the profession grew it became clear that the role of nurses mirrored the role of women.

Unemployment was common in the profession in 1935. It was at this time that the NBARN resolved that because of the serious economic conditions in the province, nurses giving care to the needy should render their bill in full, but take whatever was offered, accepting eggs, potatoes

and afghans for their services. Their goals were modest and much of what nurses accomplished was hidden. It is difficult to measure degrees of caring. There was, however, the public realization that good nursing care was a valuable commodity. Because of the social systems, it was unfortunate that while the distinctiveness of nurses grew monetary remuneration for their services fell. The public wondered what would happen if nursing care were not available? The public were reminded of the nurse's value when future generations of nurses sought appropriate recognition for their services.

There is ample evidence that New Brunswick nurses recognized that the determinants of people's health depended on who they were, where they lived and how they lived. This insight, their ongoing need to meet historical commitments, and the fact that they represented the Province's two main cultures made them pioneer entrepreneurs looking for opportunities to extend their services. Many nurses went into the community taking their work where it would have the most impact. Effective agents, nurses shared their skills as neighbourhood caregivers leaving their signature in every homestead and hamlet. Nurses became their patients' confidantes. Their knowledge of the life-enhancing benefits of human interaction was ever present.

Wars and the Great Depression helped elevate the image of the nurse to great heights. Such disasters also presented problems by increasing their responsibilities. Nurses were in greater demand during wartime and epidemics. The Association made "Joint Enrolment Lists" of members who volunteered for military nursing service and emergencies. Some nurses kept themselves available to the Minister of Public Health, to help with infectious disease control. Nurses became responsible for educating people in the lines of prevention. In 1919, the province's five community health nurses were all located in the City of Saint John, but by 1926 there were thirty-three nurses in public health working in child welfare, mothers' leagues and diphtheria immunization clinics. Nurses taught voluntarily



Maude Retallick, Superintendent of School of Nursing, Saint John General, 1913-1920.



Inez Smith, President of the Registered Nursing Assistants of New Brunswick, 1973-1976, and Executive Director/ registrar, 1977-1988.



Group of New Brunswick Nursing Sisters leaving Saint John for overseas duty, 1943.



New Brunswick Nursing Sister Norma Hill, No. 16, Canadian General, W.W. II.



Leaving Camp Sussex Military Hospital for overseas, 1943.



New Brunswick Nursing Sisters in working khaki, Bruges, Belgium, 1944.



and, in that same year, 1300 members of the public were given forty home nursing classes.

Their participation in epidemics, like tuberculosis, involved acute, extended and preventive care. As evidenced by student health records, this placed the health of the caregiver at risk. As early as 1902, student nurses had to band together to protect their own welfare. Nurses at the Saint John Public Hospital, during an outbreak of smallpox, had asked a Dr. Addy of Saint John for help because they were overworked. As a result of this request, which was termed inappropriate, the Board asked the students to apologize or resign. They subsequently resigned as a group. In the 40s and 50s, nurses of the Victoria Public Hospital, Fredericton, provided hours of constant care re-educating the muscles of the province's poliomyelitis victims, with few resources except an iron lung and Sister Kenny's hot pack therapy. Years later public health nurses worked throughout New Brunswick immunizing children with Salk vaccine.

Nurses volunteered when disasters struck. Miss Maude Retallick, who later became a secretary/treasurer/registrar of the NBARN, led fifteen Saint John General Hospital nurses in 1917, in response to the Halifax explosion. These women were commended by that City for their outstanding and self-sacrificing aid. Originating in the 60s, a civil defence committee of the NBARN helped prepare its nurses for emergency disasters.

Nurses took their skills internationally. In 1969, Yolande Albert of the Hôtel-Dieu, Edmundston, served on the hospital ship Hope and did emergency relief work during the floods in Tunisia. A documentary called "Doctor/Teacher/Friend" was made about her work.

The patriotism of nurses leaps from the record books. Nursing sisters served overseas, many in South Africa; those at home worked in military hospitals, promoted programs for maintenance of health on the home front, purchased war bonds and made hospital supplies. In 1918, Nursing Sister Anna Irene Stammers became the

first New Brunswick woman to lose her life while on active duty working aboard the hospital ship Llandovey Castle. Nurse Ina Mae Duncan was the first nurse casualty when the Athenia was torpedoed. *In 1943, 14.7% of New Brunswick nurses were on active military duty, the second highest number in the Dominion.* Nursing sisters from New Brunswick continued to serve with distinction in the world conflicts that followed. Jessie E. Lawson, a graduate of the Soldiers Memorial Hospital, became chief nursing officer (volunteer) for the Saint John Ambulance Branch in 1978. She flew aeromedical evacuation during the Korean airlift and was a former director of nursing service, Canadian Forces Medical Services.

Shortages of nurses during wartime forced the NBARN to look at the value of auxiliary workers, which led to their involvement in the development of the Province's first practical nurses program in 1946. Called Registered Nursing Assistants, this category of worker grew and developed for nearly twenty years under the direction of the NBARN. In 1973, Albert Cowie became the first RNA named to NBARN council. In 1977, RNAs became independent but their relationship with the NANB continued as valuable allies on the health care team.

Spanning three-quarters of a century, the number of nurses grew from 59 in 1916 to 8600 in 1991. The structure of the Association allowed nurses to narrow the gap between the perception of health care and the need for prevention — specifically through a primary health care model that emphasized caring rather than curing. Before the 1957 *NBARN Act of Incorporation*, which expanded the NBARN's legal responsibilities, the Association was the thread that pulled nurses' far-reaching and ambitious objectives together. It linked the elite nurses with the rank and file and strengthened them to confront the often powerlessness of their role. The willingness of some nurses to speak for what they believed in became the Association's most valuable resource.

Groundwork laid by the NBARN's committee on education, after W.W. II, resulted in the

adoption of a plan for the education of nurses which allowed them to enjoy the enviable reputation of promoting high standards of nursing for New Brunswick health consumers. Closely linked with its national body (the Canadian Nurses Association (CNA)), in 1949 the NBARN became the first province to include a subscription to the professional journal, *The Canadian Nurse*, in its registration fees. The Association strove for accountability and was an early presenter of a brief to the Royal Commission on Health Service in 1961, expressing concern for the basic principles of nursing education. Furthering its aim to become even more accountable, the NBARN, in February 1973, became the first nursing association in Canada to add public representation to its managing body in the person of Dr. Austin M. Clarke of Moncton.

Upgrading for nurses became a requirement and non-active nurses who wished to re-enter nursing were required to take refresher courses. Programs that gave inactive nurses professional status began in 1965. Continuing education programs were sponsored through the efforts of the NBARN and the first university school of nursing at UNB. Members were offered educational workshops. Post-basic mental health courses advanced psychiatric nursing to the benefit of the mentally ill. Eventually an audio-teleconferencing format made the baccalaureate program available to nurses far-distant from the university schools of nursing.

The Association grew like a healthy child, in size and activity, and during 1979 became an active political player. New Brunswick nurses were beginning to think globally and act locally. During public hearings in 1989, the NANB spoke on the Meech Lake Accord believing that, as the largest group of health care providers, they had a distinct obligation to see that the consumers' rights to basic health care were met. The Association's belief in providing quality care extended to meet the needs of nurses who wanted to study in their home environment. In 1991, the Department of Advanced Education

and Training began funding the New Brunswick Modularized Nursing Refresher Program. Nursing's ongoing attention to the promotion of education, in areas like patient counselling and health education, has complemented the duties of New Brunswick doctors.

When hospital school systems for training nurses had served their purpose, the NBARN examined its conscience and proceeded to prepare its nurses for change. In order to make the transition successful, nurses had to learn how to balance their private lives and personal growth with meeting client's needs, taking into consideration the corresponding occupational hazards, ethical issues and liability risks. Besides looking after registration, self-regulation and educational standards, the Association became a vehicle to help its members maintain their principles. Years of meetings with government departments and organizations in an effort to resolve issues culminated in the *Nurses Act* of 1984 which protected their title and outlined their legal responsibilities and standards in relation to other groups, particularly auxiliary nursing personnel. The *Nurses Act* clarified the mandate of the Association. Protection of the public, by ensuring competent health care workers, remained a major concern. That same year, at the national level, the intensive efforts of nurses were influencing the *Canada Health Act*.

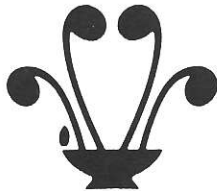
There is widespread evidence, in Association briefs to government, of the sense of social responsibility that grew within New Brunswick nurses. At the initial board of directors meeting in 1917, nurses passed a resolution to support women's suffrage, resolving that ... *women measuring up to the standards of men shall have the right to say something about the communities in which we live, the right to say what sort of laws we shall have, the right to choose officers, to enforce these laws and that these rights shall not be denied on account of sex*. Fifty-eight years later, on International Women's Day, two nurses represented the NBARN at the first conference held for New Brunswick women. The NBARN acted to protect nursing and consumer interests



Marilyn Brewer initiated collective bargaining for nurses in New Brunswick.



Madeleine Steeves was President of the New Brunswick Nurses Union from 1982-1990.



by responding to new and amended legislation. Participation in moulding health policy continued and in 1988, the NANB presented five briefs to government in five months. The value of lobbying became more apparent to New Brunswick nurses.

Through the Association, nurses spoke out on issues involving people afflicted by illness beyond their control. Committees studied the many government reports like *LeDain's Non-Medical Use of Drugs* and the *Hastings Report on Community Health Centres*. Nurses determined their role in the behaviour of those who abused substances and, in 1978, co-sponsored the first provincial seminar for "Women and the Non-Medical Use of Drugs." The NBARN took positions on other issues threatening people's health. The nurse's concern for smokers, child abuse and mandatory seat belt legislation was widely publicised. Guided by high standards, and a code of ethics, the Association helped nurses become visible in their role as patient advocates. In 1979 the NBARN initiated and helped sponsor the province's first "Conference on Patients' Rights." Today, the Association shares its educational resources on patient's rights with New Brunswick care receivers.

As a registering body, the NANB is responsible for the discipline of its members. The Association also recognizes that the professional conduct of its nurses does not preclude them from promoting their interests. In one of its many growth experiences, the NANB sorted out the mood and aspirations of its members concentrating its attention on the balance between professional status and commitment. The nurses' need for financial security and decision-making authority was evident. But first nurses had to learn how to work comfortably among themselves.

The Association was an early supporter of women's rights in the workplace. In 1921 it petitioned government to enact a "minimum wage act" that would regulate wages and conditions of employment for women and young girls. As the organization matured, its concern

for the social welfare of its nurses broadened. In 1965, a committee of nurses waded through a snow storm to keep an appointment at the Legislature with then Premier Louis Robichaud in an attempt to negotiate better salaries for nurses. That was the year that the NBARN approved the principle of collective bargaining. The establishment of a committee to deal with social and economic affairs set the stage for collective bargaining as nurses understand it today. NBARN's Public Relations Officer Marilyn Brewer was involved in the process when Dirkje Johnson became NBARN's employment relations officer in 1966. In 1969, the first collective agreement was signed, but only after difficult negotiations. The New Brunswick Nurses Provincial Collective Bargaining Council (NBNPCBC) was formed in 1975. Nurse Grace Stevens joined later by nurse Glenna Rowsell, well known in nursing circles, worked to implement collective bargaining. Miss Rowsell attended a meeting in Halifax, Nova Scotia, November 14, 1976 to discuss wage controls of New Brunswick nurses. Prime Minister Trudeau's sympathetic response at the time was that it was "tough luck" that New Brunswick nurses were behind the rest of Canada in wages.

Constitutionally distinct, but in partnership with the NBNPCBC, the NBARN demonstrated to nurses the impact of unity of action. In 1976, the NBARN endorsed the principle of a one-day walkout in a legal demonstration by the New Brunswick Nurses Provincial Collective Bargaining Committee when nurses were unable to justify salary differentials. This co-operative act helped people realize the province's dependence on nurses. The nurses' legitimate, well-thought-through approach identified them as a source of pride and hope. Nursing, that for so long hovered between the past and the future, was realizing its power and potential through the united efforts of its members. Today, the NANB furthers this attitude of cohesiveness by supporting nurses working in specialties and by helping nurses who wish to form special interest groups. These

networks provide nurses who have mutual concerns a means to promote their aims, share their experiences and exchange their ideas.

Concern for human rights, advancements in technology, changes in urban and rural lifestyles and in the planet have occurred since NANB's beginnings. In its efforts to accommodate members, the Association had to expand in all directions. With a whole new gamut of people problems to face, nurses' functions have had to shift to meet changing needs in a variety of settings. The Association's many committees strive to promote the member's ideas as well as the central concerns of nursing — prevention, care, comfort and helping people cope. Such caring is exemplified in the practice of individual nurse-members like Dr. Shirley Alcoe who was nationally recognized for her commitment to the cause of cancer care and control. To function as it should, the Association has to play a dual role: to advocate both for the caregivers and the care receivers.

The Grange Commission of 1983 warned nurses to examine their own rights and to keep informed on issues of law. Recognizing that nurses are accountable for what they do, or fail to do, the NANB published *Nursing Standards and Information*, a series of booklets, to help guide nurses in areas such as law, ethics, standards, and so forth. Nurses also take comfort in the knowledge that, through their Association, they are protected by liability insurance and, since January 1989, they are part of the Canadian Nurses Protective Society, a national society to protect nurses in the event of liability suits.

The NANB is exploring the future role of the nurse in assessments, case management, screening, patient teaching and family support. Entering the last decade of the 20th Century, members of the Association are broadening their opportunities and their work load. As they continue to add to their responsibilities, working conditions and environments become sources of conflict. Consider that in 1991, when health education is supposedly a priority, the health needs of children in New Brunswick schools are

being assessed by one nurse for every 3500 students.

Association members and representatives of the NANB carried out a province-wide review in 1990 to determine how they could best help each other in the future. The united planning of the Association and the New Brunswick Nurses Union remains essential to the improvement of the nurse's status. Nurses are recognizing that their active participation and investment in their professional associations has far-reaching effects. Nursing is no exception to the evolutionary process; today's nurses are making their claims for equal status. Even though nurses are constrained by the fabric of national health care programs, they strive to attain the freedom and flexibility that will allow them to do what they do best. The professional preparation for nurses of the future, as an equal partner on the health team, is therefore a priority of the NANB. The fact that nurses are not recognized as partners at the point of entry for patients seeking primary care is a loss to consumers and an impediment to the highest potential of New Brunswick nurses.

The Association's record is impressive. It shows that New Brunswick nurses have given faithfully of their time and skills. The NANB has recognized many of its own with life memberships and certificates of merit while others who have helped the profession have been awarded honorary memberships. One day, a comprehensive history will honor the many ideas that shaped New Brunswick nursing and its institutions.

Katherine MacLaggan's words of wisdom in 1964 remain a guiding source to NANB members as they approach the end of this millennium: *This is the day and age when new ideas get in the way of comfort. It is also a period in which time has a new dimension. The luxury of delay has disappeared. It is your responsibility to participate in the issues of your time.*

Nurses act because they are expected to or because they want to become involved in the issues of the day. They identify unmet needs in their patients and communities and become

involved. Nurses know about facing difficult times; this decade is no exception. But nurses are no longer willing to deny themselves self-satisfaction in their workplace. By becoming politically active, nurses are liberating themselves from stereotypes and are more at ease with the concept of power and politics. The new image that they project is of women caregivers who have learned to revalue their caring work. They have also learned the benefit of celebrating their accomplishments together.

Each nurse who seeks and hopes for the best in nursing has a vision, makes a design and pursues her goal. Nurses constantly advocate in favor of wellness through healthy public policy. The milestones show that the NANB is accomplishing its purpose in making the Province a better place to live. By making clear their contributions to society's health and by combining vision and conviction into shared action, New Brunswick nurses will undoubtedly enjoy the credibility and political power that they deserve.

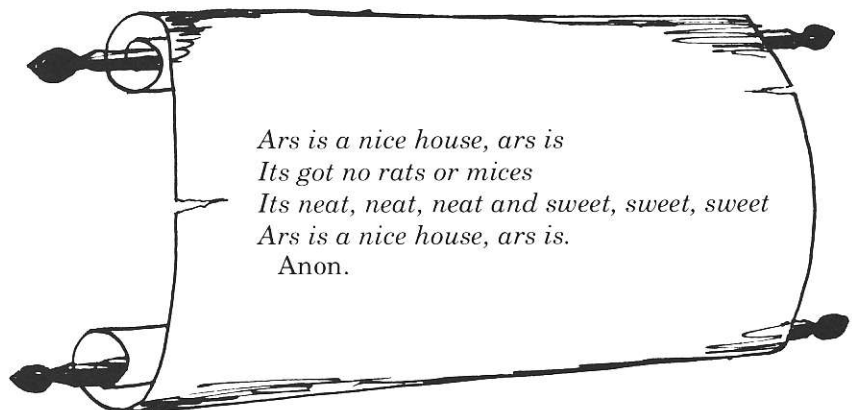


VON nurses at work.



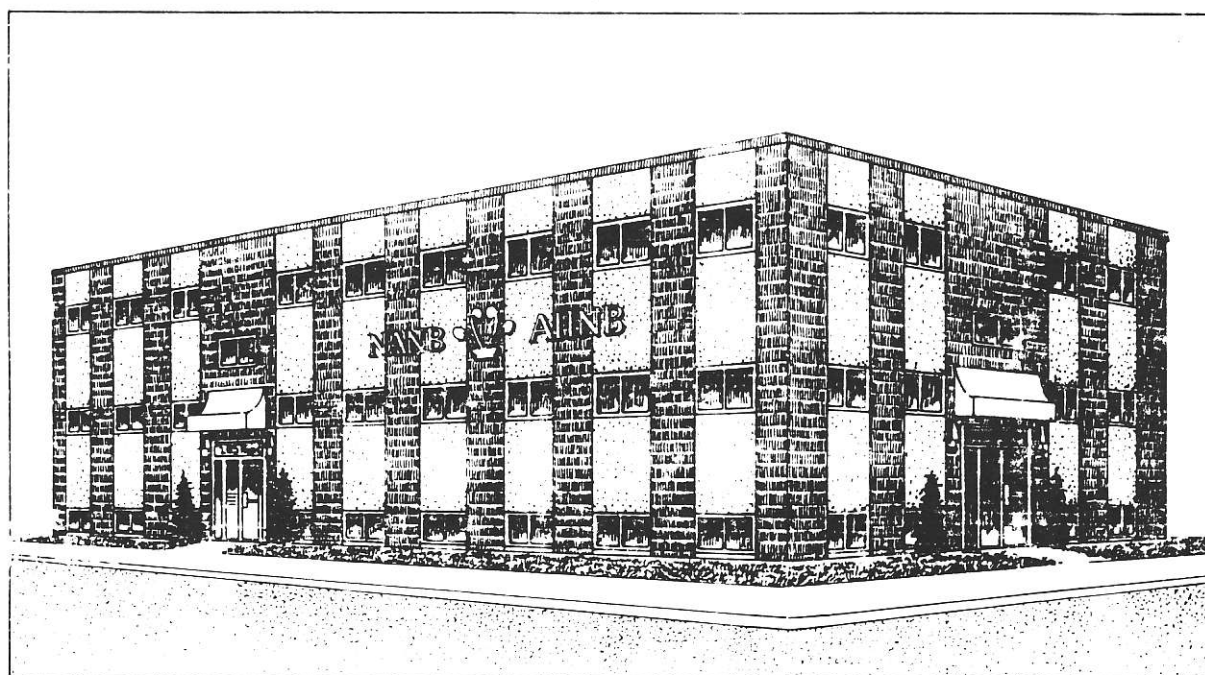
New Brunswick public health nurses at work.

# Provincial Office





Nurses Association of New Brunswick Headquarters at 231 Saunders St., Fredericton.



Current Nurses Association of New Brunswick Headquarters, corner of Regent and Brunswick Streets, Fredericton.





Muriel Archibald, Registrar of NBARN, 1955-62.



Silver tea service donated to the Association by Muriel Archibald in 1964.

from the conference room into a hotel. The Association had to consider options for relocation.

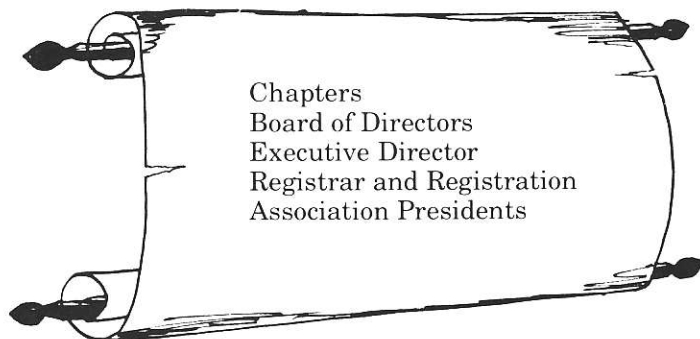
In 1990, the board of directors examined its resource base and potential when a premises proposal was introduced. The new headquarters would permit on-site meetings for all groups of the Association with additional space. The result was a major growth step: the purchase of a twenty-year-old, two-story brick office building, prestigiously located in the downtown core of the City close to government departments and the Legislature. With high hopes and bag and baggage, the staff moved to 165 Regent Street on March 23, 1991. There was some sadness but the NANB is after all people, not a building. But they left knowing a structure remained that had done a good thing for both its nurses and the public and also realizing that it would perform a similar service for the Canadian National Institute for the Blind, its new owner.

When welcoming guests to an open house during the summer of 1991, President Claire LeBlanc had this to say: *The Nurses Association of New Brunswick is pleased to be part of Fredericton's downtown core, in close proximity to the Premier's office, the provincial Legislature, the Department of Health and Community Services and the Department of Advanced Education and Training. All of the foregoing, at one time or another, have called upon the Association to share its nursing expertise. This new building will make this sharing and promotion of nursing expertise and knowhow that much easier.*

The service record of New Brunswick nurses has enhanced their professional image. And, appropriately so, so has the new headquarters.

For each individual nurse of this province, this new building means having the physical resources to support nurses in providing quality care to the people of this province, today, and in the future where the nurse will be playing an even more significant role.

# The Decision Makers



**N**ANB is the Province's largest health organization, predominantly comprised of women. It speaks as the voice of nursing to the public and to health-related groups ensuring that the interests and concerns of all nurses are represented. It strives to insure the protection of health consumers.

All New Brunswick nurses have an opportunity to participate in the affairs of their Association at local, provincial and national levels. Records show that nurses empower themselves by involving themselves directly in the Association's business and by fostering its objectives.

## Chapters

Eleven chapters promote the Association and the profession at the local level. Members in the following chapters make up the Association: Restigouche Chapter, Acadian Peninsula Chapter, Bathurst Chapter, Carleton Co. Chapter, Charlotte Co. Chapter, Edmundston Chapter, Moncton Chapter, Miramichi Chapter, Saint John Chapter, Sussex Chapter and the York-Sunbury Chapter. Chapters were formed to encourage participation in nursing affairs, to further nurses' interest in the public welfare, and to make members aware of the goals and actions of the nursing profession nationally, internationally and in their own province. Members who are active in their chapters are the unsung heroines of the Association. It is at the grassroots, the chapter level, where changes in the organization are first introduced. Interest groups, individual nurses and the board of directors may also send resolutions to be debated at the annual general meeting.

Nurses are represented province-wide by a board of directors whose objective is to provide generations of nurses with a solid base on which to build the profession of the future. The activities of the NANB are governed by resolutions adopted at annual meetings, by legislative activities dictated by the *Nurses Act* and *Bylaws* and by the need to respond to government and social developments that affect

members. Issues identified by chapters often go to committees for further study.

## Board of Directors

Twenty women served on the first council or board of directors formed by New Brunswick nurses in the early 20th Century. *In 1916, on motion duly made and seconded the following officers were elected: President Arthurette Branscombe, 1st Vice-President Gertrude Williams; 2nd Vice-President Sarah Brophy; Registrar Mabel Richards; Recording Secretary Lillian Kaine; Corresponding Secretary Ada A. Burns and Treasurer Emma Mitchell.*

In 1941, Reverend Sr. Kerr called the meeting of the council of the NBARN to order in the nurses' home of the Saint John General Hospital. Their discussion centered around war bonds, sending money for the Nurses Air Raid Fund and the rehabilitation of London's refugee children. They talked about enrolling nurses for voluntary emergency duty, first aid courses and the showing of a film *The Home Front*. These nurses were also concerned about the role of a "subsidiary worker" should the shortage of nurses become more severe. Entering the 90s, decisions made at board meetings resemble those taken at other large corporate organizations. Past discussions have centred around such issues as the impact of the federal Government's Goods and Services Tax, entrance requirements for nurses, budget increases, the purchase of city property and the impact of the foregoing on members.

Four times a year, twenty-two volunteer nurses from a variety of nursing backgrounds — seven elected officers, eleven chapter presidents (locally elected) or their representatives, four members-at-large — plus three public members-at-large gather in the Province's Capital invested under the *Act* with the authority and responsibility of discussing the Association's business. However, all this will change in September 1992 when the NANB board of directors will be pared down to 21 persons and board members will be assigned



Gwen Hermann, 1964-69



Karon Croll, 1976-1978



Bonny Hoyt Hallett, 1979-84.



Mary Shields, 1984-1985



Lucille Auffrey, 1985-91.



Anne Marie Atkinson, 1991-

specific responsibilities. Since November 1974, when five chapter members were chosen to attend board, any New Brunswick nurse may make an advance request to sit in on board meetings as a first-hand observer.

Board meetings in the 90s are a major undertaking. The translation equipment alone would barely fit into the third floor at 231 Saunders, where the NANB meetings used to be held. Preparation for board meetings requires the work of two secretaries for two full days.

A typical meeting begins with the President's remarks. In November 1990, for example, Claire LeBlanc's words reflected the shared vision of caregivers and care recipients. Interaction of the group showed the board's desire for a close relationship, trust, and congeniality. There was open discussion with the utmost regard for individual opinions.

Board members have to deal with long agendas and marathon sessions. They listen as the executive director reports that programs, priorities, projects and committee activities are on target and are reassured that the NANB is cautiously meeting its financial objectives. Possible approaches to various projects are presented by membership committees who seek action on specific health care projects, nursing education and nursing practice matters. Chapter presidents, representing all regions of the province, share the concerns and accomplishments of chapter members.

The executive, which consists of the officers of the NANB, meets when necessary. With the aid of professional and support staff, auditors and legal counsel, the board considers recommendations. Based on day-to-day realities, the board's vision becomes that of its many nurses. Expertise of staff from provincial office, all working for the betterment of nurses, is utilized. Observing rigid parliamentary procedure board members struggle, in either official language, to find accurate wording for their policies. Concerns that begin at the grassroots are dealt with by the board and membership is informed of the action taken.

The Association undertook internal and external reviews of its structure in 1978 and 1985. In 1989, a committee travelled the province in search of members who could offer first-hand suggestions on how to redesign the NANB. A new vision was formulated in February 1991 by Anne Marie Atkinson and six members representing the Association linguistically and geographically, including areas of nursing practice, education and administration.

The report of the organizational redesign committee focused on some structural changes and emphasized process. Recommendations based on general consensus among the nurses consulted were directed at revitalizing chapters, defining roles for a smaller board and streamlining the committees. In the spring of 1991, Anne Marie Atkinson was appointed the first director of corporate affairs with the responsibility for implementing many of the organizational changes approved by membership. She was succeeded in July 1991 by Pam Armitage to carry out the same mandate. The vision of the NANB put forth by this review committee focused on nurses.

## Executive Director

An executive director's work is extensive and varied and constantly changes. Despite stress and change, she is expected to remain constant and committed while seeing "both sides of the coin." Her challenge is to blend several thousand personalities into a working team. Lucille Auffrey, nursing consultant with the NANB in 1982, has been the executive director since 1986. She has the distinction of being the first French-speaking Acadian executive director. Her mandate is to work for nurses who are confronted by the complicated issues of the day, such as threats to health care standards, decreased funding of the health care system and improving the worklife of the nurse.

The executive director responds to issues brought forward by members that will advance nursing and promote quality health care. She relies on the loyalty and perseverance of the

professional and support staff. Her functions include reviewing the year's work and writing detailed annual reports, performing in a management role, administering professional conduct reviews, acting as ambassador-at-large for nurses when dealing with the public, government, other associations and agencies.

In the past twenty-five years, Gwendolyn Hermann, Jean Anderson, Karon Croll, Marilyn Brewer, Bonny-Hoyt-Hallett, Mary Shields and Lucille Auffrey have served as executive directors of the Association. Staff members temporarily filled this challenging role when the position became vacant. Marilyn Brewer, acting executive director in 1978, referred to her situation as comparable to ... *the little boy with his finger in the dike holding back the flood*. In August 1991, Anne Marie Atkinson replaced Lucille Auffrey as executive director while the latter is on a sabbatical leave.

It is easy to write facts about these nurses, their place of birth, schooling and the positions they held. The difficulty arises when one tries to write about the purpose for which each lived her life in order to bring nursing to the stature which she envisioned. Few can understand not only the intelligence but the courage it takes to represent nursing in the fair and just manner which the membership and the public demand.

## Registrars and Registration

In order to provide quality care to New Brunswickers, the Nurses Association's first tasks included taking a census of the nursing population, determining the nurses' qualifications, setting standards and securing legislation. They began by establishing a registry in Saint John and enrolling all nurses who held diplomas for a \$1 fee. Doctors in the province were notified that the registry would endeavour to answer all night and day calls for nursing services. In 1919, the group designed an application form containing nine divisions of nursing service. Besides a "Public Registry," "Local Registries" were started in the province's five districts to keep up-to-date lists of members

in good standing. Any nurse who failed to meet the standards outlined by the Association had her name removed from the registry. The names of those who met the criteria, and others who did not, were entered in the minutes. Nurses accepted as eligible were graduates from incorporated hospitals with established three-year training schools and who had studied for three years and passed examinations. Resignations from the Association were common, even though a nurse was allowed two years in which to join and become registered. Several times the standards of qualification were lowered to accommodate delinquent members. There was always controversy over accepting nurses with less than three years training. The Association, when accused of discriminating against some schools, approached its national body to determine standards but, because this was a provincial matter, the CNA would not intervene.

It must have been a challenge for Mabel Richards, the first registrar, who carried out the duties from her home in Saint John. Her responsibilities were outlined in Article V of the first Act passed April 19, 1916. She was ... *expected to make and keep a registry of nurses who were members of the Association in good standing and, in the month of January of each year, to publish a revised and corrected list of the members in the Royal Gazette*. The names of the first members were listed in a loose-leaf binder and a card index. Postcards were sent to the initial 114 eligible candidates including nurses going overseas, those doing military work at home, nurses working in institutions and some who were inactive. The dues straggled in irregularly and certificates of registration had to be packed in mailing tubes and sent to the qualified nurses who paid their fee.

There were letters of protest in 1921 when the registration fee was increased to two dollars. The registrar received all manner of odd requests — she was often asked to collect fees that patients owed nurses. By 1925, a three dollars yearly sum secured a nurse her place on the official registry and a membership in the provincial, national

and international associations. The 205 members who paid the ten dollar compulsory dues in 1930 received printed membership cards.

The registrar scrupulously screened applications and extensive correspondence was undertaken concerning some memberships. The lack of adequate education of some women applying resulted in early efforts to raise the standards and ultimately in amendments to the *Registration Act* in 1927. Prospective nurses were required to have at least one year's high school education and be trained in a hospital with an average daily occupancy of thirty-five beds. A new act came into effect in 1943, which helped to elevate the requirements for nurse-candidates. Reciprocal registrations were provided for nurses who applied from other provinces and countries.

The early work of the Association was carried out by members without remuneration. The registrar often acted as secretary and sometimes treasurer; she also made "school visits" to the training schools. The Province's thirteen schools were visited by the registrar in 1936. In 1937 the registrar issued 1597 RN certificates. For a number of years, Emma J. Mitchell worked as the treasurer. The minutes record that she ... *gave more time than she could afford*. In 1924, eight years after incorporation, the first paid secretary/registrar received \$25 per month.

Wars meant hardship for the registrars. Nurses were absent on overseas duty and a nurse placement service was directed by Margaret Pringle when demand for nurses in civilian hospitals was great. However, due to a shortage of personnel, nurses were not always available upon request. In 1946, "temporary courtesy registrations" were issued to nurses to increase their numbers. Nurses complained about the difficulties of procuring white shoes and stockings.

Eliza P. Hegan and Minnie Armstrong worked as registrars in the early years of the Association. In 1921, Miss A. Whyte filled the role, followed by Miss A. MacMaster. Maude E. Retallick was secretary/treasurer/registrar from 1924-1941. Alma F. Law served from 1940-1954

and Hilda Bartsch from 1954-55. Muriel Archibald was the registrar between 1955 and 1962. During Mary Russell's years of service, from 1967 to 1977, she worked in a variety of capacities at provincial office.

The first full-time registrar held office for eleven years and, like many of the Association's staff, Lois Gladney assisted in other capacities when she was needed. "Mrs. G." saw the Association's staff grow from five employees, in 1959, to twelve full-time and two part-time workers in 1970. Eva O'Connor functioned in the registrar's role in the 70s when the Association underwent many changes. By 1972, registration forms were printed in both English and French. In the 80s it became necessary for a nurse to present evidence of having practised a total of 450 hours over the preceding three years to qualify for practising membership. For nine years, Pauline Rivard functioned as the first French-speaking registrar. She was succeeded by the following interim and full-time registrars: Jan Cameron Gionet, Loredanna Catelli Sonier and Lise Richard.

Fees were raised periodically and the Association gave its members annual explanations of where the "dues dollars" were being spent including money for malpractice insurance, legal and bilingual services. The registration system was computerized in 1987. By 1991, registration information could only be entered and retrieved using a computer.

Lynda Finley, the current registrar, began the 1991 registration renewal process by collecting \$200 fees (subject to 7% GST). Dues were expected on the first day of January. The 346 New Brunswick nurse graduates for 1990 were among the new applicants for registration. For her fee each nurse enjoys all the rights and privileges of a practising nurse. She is entitled to use the title nurse, registered nurse or the initial N or RN. The fee includes malpractice insurance protection. The nurse also receives notices of, and can participate in, meetings of NANB. She receives the official Association magazine and all other publications of the Association. She can be elected or appointed to hold office in the

Association and serve on committees. She is a member of the Canadian Nurses Association and the International Council of Nurses and receives *The Canadian Nurse*.

A large portion of the registrar's work is still to insure that nurses are eligible to practice. Any New Brunswick registrant, who has maintained her practice, can be registered in any province or territory. Temporary licences to practice are only issued to students and to nurses from outside the country who are waiting to write exams or receive examination results. Nurses educated outside of New Brunswick are assessed according to the provincial standards for that period. They all have to write registration exams and submit to a period of supervised clinical work if they haven't been employed in a North American country.

Like their predecessors, the registrars in the last decade were involved in committee work and, increasingly, in assessing the practice of nurses who are pursuing a variety of new avenues. This process is exciting because the entrepreneurial spirit of nurses is highly active at a time when people's environments are threatened and their health needs are varied. Nurses are determined to meet these needs by working outside of the traditional hospital and government agency settings. Registration records clearly show that the role of the nurse is expanding and constantly changing.

## Association Presidents

Nursing association presidents are elected leaders who work to make nursing more visible. At the same time, presidents have to balance work and personal demands, to expand their knowledge and to hone their political skills. The leadership and vision of the presidents of the NANB have contributed enormously to the profession's promising future. They have left behind a rich nursing heritage and have been prophetic in their discourses.



## Presidential Voices of the Past Fifty Years



**REV. SR. CORRINE KERR (1940-44)**

*Nurses must be prepared for readjustment in the post-war period.*



**MURIEL HUNTER (1950-54)**

*Remember that change does not come over-night, nor is it a matter of wishing, but of long, patient, hard work by many persons.*



**MARION MYERS (1944-48)**

*The shortage of nurses leaves many organizations greatly understaffed. Projects to consider for the coming year include a basic two-year course and a practical nursing group.*



**GRACE STEVENS (1954-58)**

*The nurse gives impressions about nurses and nursing through her appearance, attitude, actions, speech and through expert nursing service.*



**HILDA BARTSCH (1948-50)**

*Nurses must continue to make considerable efforts to get government support for nursing education.*



**LOIS O. SMITH (1958-62)**

*One thing is certain, the nurse must indeed know, and she must indeed speak if she is to carry out the functions that will be demanded of her in the future.*



**KATHERINE MacLAGGAN (1962-64)**

*Do not be afraid to become completely involved in the future.*



**IRENE LECKIE (1968-70)**

*Let us be among those who are still upon the quest — this quest being for better nursing care for all of your patients.*



**JEAN ANDERSON (1964-66)**

*Let us be critical and informed but let us make united decisions.*



**HARRIETT HAYES (1970-71)**

*Act now to ensure that our role is expanded to our expectations and not to the expectations of others.*



**KATHERINE WRIGHT (1966-68)**

*There will never be too many competent professional nurses in this province or this country.*



**APOLLINE ROBICHAUD (1971-73)**

*The future holds three C's for New Brunswick nurses — Change, Challenge and Choice.*



**BERNADETTE LEBLANC (1973-75)**

*As we adjust to change let us keep in mind what is best for the people of New Brunswick and for nursing.*



**ANNE THORNE (1979-81)**

*Pride in our efforts will become evident to others.*



**SIMONE CORMIER (1975-77)**

*Remember my password "together."*



**REV. SR. ERNESTINE BOUDREAU (1981-83)**

*Nurses must give care that goes beyond the limits and capabilities of sophisticated equipment.*



**JUDITH OULTON (1977-79)**

*Nurses have the expertise to provide preventative care in the community and primary care in the health centres which decreases the need for hospitals, saves government dollars and prevents loss of earning potential for many citizens.*



**MARY ELLEN DRISCOLL (1984-85)**

*I can think of no other profession or occupation which crosses so many lives, short of the housewife.*



**YOLANDE CYR (1985-87)**

*It is necessary for the Nurses Association to ensure that the consumer of nursing care will benefit from the high quality of service promoted by nursing practice standards.*



**CARROLL ANN O'LEARY (1987-89)**

*Now as each nurse looks to the future she will share a common vision, one in which the client gets the best possible care and the nurses' full potential is realized.*



**CLAIRE LEBLANC (1989-91)**

*1991 is a time to celebrate nursing excellence and to honour and reward those who have contributed, to underscore the achievements of yesterday and to predict those of tomorrow.*



**FONDA KAZI (1991-93)**

*As our roles in the health care system change, evolve, so too must nurses develop strategies to champion their causes.*

The Years  
The Presidents  
The Annual Meetings  
The Issues

**W**hen the chapter roll call is answered at the annual meeting, each nurse stands to represent her particular region of the Province. The host chapter welcomes the members and the spirit of comradeship is high. The business sessions are heavy and provocative in content as the nurses reassess their beliefs about nursing. Nurses who are absent can have their viewpoints represented by proxy. From the outset, nurses realized that decisions made at the annual not only affected their own lives but those of other New Brunswickers. There is evidence however that despite progress, in some instances, the history of nursing has repeated itself.

### 1916-1917

**ARTHURETTA BRANSCOMBE** addressed the newly formed organization from the podium at the first annual of the New Brunswick Association of Graduate Nurses (NBAGN) which was held in St. Stephen, in the Chipman Memorial Hospital, on July 10, 1917. She drew attention to the issues of wartime. Joyce Wishart, a nurse on furlough, spoke to thirty-four members about her war experiences. Members decided that fees for graduate nurses doing private duty should become uniform. Committees looked at divisions of the Province in order to establish local chapters. The proposed Nurses Bill brought protests because, to secure its passage, nurses were obliged to lower standards. They were expected to accept hospitals with a minimum average of fifteen occupied beds for the training of prospective public nurses. The first Association chapters, Saint John and St. Stephen, were formed.

### 1917-1918

**GERTRUDE WILLIAMS** was the first head nurse of the Saint John General Public Hospital Training School for Nurses. She was president at the annual meeting held in the Miramichi Hospital in Newcastle in 1918, the same year that Canadian women won federal voting rights.

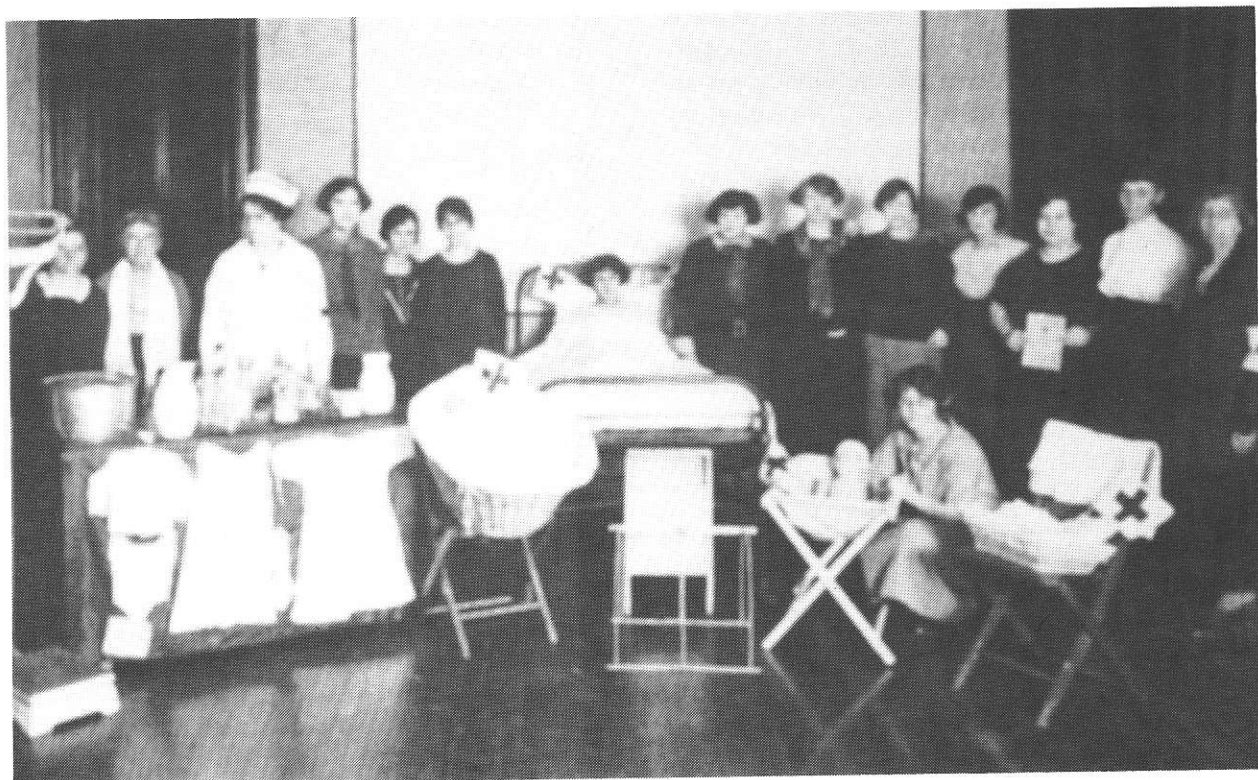
This president called for a uniform fee schedule for private duty nurses at the rate of \$18 per week for 24-hour duty. Members moved to adopt a "registered nurses pin." Recommendations were made for lectures in public health to be given to student nurses. Discussion focused on "thorough maternity training" for nurses. Membership fees were set at \$1.00. Members decided to purchase a \$1000 Victory Bond in \$100 amounts.

### 1918-1919

**CHARLOTTE BROWN** was represented by Vice-President Margaret Murdoch at the third annual meeting in Saint John. Dr. William F. Roberts, the first Minister of Health in the British Empire, spoke to members on the compulsory registration of all nurses. *As in war*, he said, *roll call is required to know the number of forces, so in disease it is important to know the number of nurses because the (spanish) influenza epidemic is sure to occur.* A letter of protest to the original draft of *Dr. Roberts Bill* was signed by *All Nurses*. Later members compromised with the Minister's requests and voted unanimously for the Act that would provide registration for all nurses in New Brunswick. The group also suggested that a public health nurse be appointed to the Department of Health. Dr. Wherrett, a tuberculosis diagnostician, told the press that the nurse was the most likely medium to take to the public the knowledge which both doctor and nurse had of the disease. Nurses, he believed, were responsible for the education of people in the lines of prevention. A midwives' committee was active and nursing directors expressed further concern about the education of student nurses. The third chapter of the Association was formed in Fredericton in 1919, the year when New Brunswick women gained provincial voting rights.

### 1919-1926

**MARGARET MURDOCH** gave seven presidential addresses: Fredericton, 1920; St.



One of the first "home nursing" classes held in Saint John.

Stephen, 1921; Moncton, 1922; Woodstock, 1923; Saint John, 1924; Campbellton, 1925; and Fredericton, 1926. She was superintendent of nurses at the Saint John General Hospital for 26 years, retiring in 1948. During her term as president, hospital authorities were asked to employ only nurses who were registered in New Brunswick. In 1919 the first registration examinations took place and a nursing census was taken to determine nurse population in case of disaster or epidemics. The superintendents of New Brunswick hospitals united in an effort to establish uniform hospital records. They subsequently adopted curriculum standards. Student nurse affiliation with tuberculosis sanatoriums was approved. The Moncton Chapter was formed in 1920. That year seven nurses applied to write R.N. exams. Two students couldn't write the exams because they were on duty. At the fifth annual meeting, a "Chair of Nursing" was suggested. The change of name of the organization to the New Brunswick Association of Registered Nurses was broadly debated. Raising the educational requirements for admission to nursing schools was a topic at every annual. In 1922 nurses talked of a Nurses Practice Committee. In 1923 New Brunswick nurses contributed \$1,175.95 toward the War Memorial in Ottawa. In 1924, Alina Jean McMaster informed the members that some student nurses were being accepted with Grade 7 education. Entrance requirements were raised to one year of high school in 1925. The Woodstock meeting was highlighted by ... *a motor ride and the nurses were guests of the doctors and their wives at a dinner and dance at the Golf Club*. Twelve hour shifts were advocated for private duty nurses in 1926, the first year that the Canadian Nurses Association met in New Brunswick.

## 1926-1936

**A. JEAN MacMASTER** provided years of service to the NBARN. She presided over annuals in Moncton, 1927; St. Stephen, 1928; Saint John, 1929; Bathurst, 1930; Fredericton,

1931; Moncton, 1932; St. Stephen, 1933; Saint John, 1934; Fredericton, 1935 and Moncton, 1936. During her presidency, unemployment among nurses was a serious matter, compulsory registration for all nurses was advocated, as was the elimination of 24-hour duty. Nurses sought a scheme of health insurance with nursing services included. There was not one full-time instructor of student nurses in the Maritimes. Amendments to the *Act* were presented to the Legislature in 1931. Reference to this in the minutes states that ... *it is reported that the lawyer changed the number of occupied beds for an appropriate school from 50, which he believed to be excessive, to 35*. In 1934, informal discussions were held with the superintendent of the Provincial Hospital regarding a course in psychiatric nursing for student nurses — twenty years later this was established. At the 1935 annual, nurses approved resolutions to improve the status of schools of nursing, and to hold inspection of the schools. Junior matriculation applicants were given preference. In 1936, the Association failed to get new legislation to raise the standards of nursing schools. Members of the Legislature felt ... *that the Association was trying to close down small hospitals*. The minutes record that ... *the work of Public Health Nurses remains at high standard despite their lack of encouragement*.

## 1936-1940

**GEORGIE VAN DORSSER** presided over annuals held in St. Stephen in 1937, Saint John in 1938, Fredericton in 1939 and Moncton in 1940. These members stressed the necessity of co-operation between the schools during the inspections which Maude Retallick had begun to carry out. Eight-hour days for students were proposed. Reciprocal registrations were approved. Amendments to the *Registration Act* was a prime issue. In 1938, Miss Van Dorsser presented the Association's first scholarship of \$250 ... *to a New Brunswick nurse for an academic course*. The Association distributed pamphlets entitled *Should You Wish To Become*



a Nurse to female students in the province's high schools.

## 1940-1944

**REV. SR. CORRINE KERR** chaired annual meeting sessions in Newcastle in 1941, St. Stephen in 1942, Saint John in 1943 and Fredericton in 1944. Seven years after the first proposal, the eight-hour workday for private duty nurses became a reality. A new *Registration Act* also came into effect. Nurses who were dissatisfied with their workplace were advised to contact their Association. A twenty-fifth birthday party was held in Newcastle with the gift of a candled cake from the St. Stephen Chapter. Emma Trafton, a Fredericton nurse, was awarded an NBARN scholarship to take courses in public health at the University of Toronto. Nurses at the 1944 annual met at Fraser Memorial Hall, Fredericton, in party dresses: ... *cars and buses whisked us away to the Decoy Inn where at beautifully decorated tables we enjoyed a most bounteous dinner. In a pleasing manner Miss Dorothy Parsons handed the chair over to Miss Marion Myers who proposed the toast to the King. Immediately following, a sing song was held with Sister Kerr doing the solo parts, very ably accompanied by Mrs. Brewer.* The nurses resolved that a resolution be sent to the Provincial Government requesting support for schools of nursing that were comparable to other institutions.

## 1944-1948

**MARION MYERS** was appointed the first full-time qualified instructor in the Saint John School of Nursing in 1932. As president, she spoke from the platform in Moncton, 1945. She reported on the annual meeting of CNA and the fact that the NBARN could set up a labour relations group within the Association when ... *the time comes that this is needed.* The following year nurses met in St. Stephen. Student nurses attended the meeting in Saint John in 1947. Miss Myers opened the 32nd annual in Fredericton

with these words: *We are confronted by the same problems which existed one year ago, a nurse shortage, revisions to the Act and a revised first year curriculum.* During this term, Katherine E. MacLaggan chaired an Association committee on education and created an unofficial working committee which included representatives of other groups: Medical Society, Hospital Association, Department of Health, hospital administrators and the public. There were 722 single and 259 married nurses employed in New Brunswick in 1932. The Campbellton Chapter came into being in 1946 followed by Edmundston in 1947.

## 1948-1950

**HILDA BARTSCH** participated in two annuals: Edmundston in 1949 and Moncton in 1950. She later filled the secretary-registrar's role from 1954-1955. During her presidency, Alice Wright, RN, BN, whose knowledge of nursing concerns and problems had a positive effect on the future of nursing education and the direction of the Association, conducted a health survey in the Province. 1951 was an anxious time for the NBARN but wise counsel prevailed during discussions of the formation of two separate organizations. On August 15, a resolution was passed unanimously that *examinations may be written in French or English and that the decision regarding the language used rests on the decision of the nurse-candidate.*

## 1950-1954

**MURIEL HUNTER** spoke to the pertinent issues of the day at the 1951 St. Stephen annual, at the 1952 Saint John annual; at the 1953 Fredericton annual and the 1954 Edmundston annual. Provincial qualifying exams were introduced. In 1951 government grants provided for the first nursing school advisor; Isabel Lane filled the role for eight terms. That same year, Association headquarters moved to the Provincial Capital and personnel policies were

established for New Brunswick nurses. It was also recommended to proceed with some kind of legislation for practical nurses. In 1953 proposed minimal standards for New Brunswick schools of nursing were adopted. Student nurses were talking about becoming an organized part of the Association. A centralized program in nursing was a vital topic when Kathleen Russell, a Canadian nurse educator, set out to collect information on nursing education in the province. The Miramichi Chapter became active in 1950; Carleton County Chapter followed in 1952.

## 1954-1958

**GRACE STEVENS** had to focus the nurses' attention on many items of business at annuals in Moncton in 1955, in Saint John in 1956, in St. Stephen in 1957 and in Woodstock in 1958. In accordance with the recommendations of the Russell Report which was presented at the 1956 annual, the Association accepted the responsibility of finding an efficient way to prepare nurses for the wide range of nursing services which the public demanded, including hospital services and wider community services. Nurse Ryllys Cutler came on staff in 1957 to co-ordinate continuing education for nurses and work on problems of patient care. The first "Nursing Institutes" were recommended. Nurses learned that their 1958 \$20 registration fees were tax deductible. Miss Stevens' address on "Nursing Education" was heard by 253 nurses at the 40th Anniversary Meeting, in addition to students and nine of the Association's charter members. Protocol was an issue when nurses were advised in their news bulletin never to clink glasses, or play the National Anthem, when they toasted the Queen. The Bathurst Chapter took form in 1956.

## 1958-1962

**LOIS O. SMITH** drew attention to the importance of institutes for head nurses, supervisors and instructors. The 1959 meeting

in Campbellton focused on continuity of patient care. The *Act* had been amended to include nursing assistants. The Tracadie nurses formed a Chapter that same year. "Faith in the Profession and the Future" was stressed at the annual meeting in Newcastle in 1960. The annual was held in Fredericton in 1961 with the theme "Better Nursing Through Better Nursing Education". Planning sessions continued for psychiatric nursing affiliation. Some student nurses were receiving eight hours of education with the Provincial Hospital and French-language students were sent to Quebec for their psychiatric affiliation. In 1960, in light of the findings on the "Implications of the Hospital Insurance Plan on Nursing Services," the nursing committee recommended that ... *the current minimum salary for a first level position for a registered nurse be \$3000.00 a year.* In her final address in Edmundston in 1962, the president commented: *There is no end to the "saying" on any subject that has to do with nursing — by now the Act had been amended seven times.*

## 1962-1964

**KATHERINE E. MacLAGGAN** played a major role in the direction taken by the Association. She presided over memorable annual meetings. Interspersed with those activities was her work on her doctoral program in New York. The 1963 theme in Moncton was "Law and the Practice of Nursing." Student nurses graduated from the University School in Fredericton. Nurses expressed concern over their basic monthly salary of \$275 compared to an RNA's \$190. Miss McLaggan's 1964 address to 365 registrants was aimed at "The Heart of Nursing." She stressed a nurse's right to fair remuneration for her services and fair working conditions. During Miss McLaggan's term she accepted a Centenary Certificate, on behalf of the Association, from the Red Cross Society in recognition and appreciation for years of collaboration in mutual humanitarian tasks.

# PORTRAIT OF NURSING

A PLAN FOR THE EDUCATION OF NURSES  
IN THE PROVINCE OF NEW BRUNSWICK

by

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## 1964-1966

**M. JEAN ANDERSON** chaired the St. Stephen meeting in 1965. She enjoyed the privilege of presenting life and honorary memberships at the Golden Jubilee Meeting, Saint John, in 1966. The half-century birthday party was held in St. Peter's CYO Hall, Saint John. Three of the charter members, Miss Ada Burns, Mrs. Margaret McKelvey and Mrs. Mildred Vaughan shared in the ceremony. Miss Anderson introduced Katherine MacLaggan's study, *Portrait of Nursing* at the 49th annual. During her term, a committee on social and economic welfare was developed. By 1965, French-language students had a training school in Moncton. Collective bargaining was approved. In 1965, the first reorientation program for graduate nurses was held at the Victoria Public Hospital in Fredericton. Sussex became the 11th Association chapter in 1965.

## 1966-1968

**KATHERINE WRIGHT** conducted the session in Fredericton in 1967 when members were asked to consider "Nursing Service in Transition." The Frankel Report stimulated discussion in the area of employee-employer relations. The starting salary for a staff nurse was recommended at \$375 per month. The Association prepared briefs on medicare and aging and presented them to government. Nurses could bargain collectively under the *Nurses Act*. Miss Wright gave a rousing address at the 1968 annual in St. Andrews on ... *the long overdue changes to the process of educating nurses*. The theme of the meeting "Professionals and Unions" was emphasized in a panel discussion. The Association resolved to conduct its operations in French and English. Katherine MacLaggan died in February 1967 having perceived what lay ahead in nursing's future. In 1968, the nursing building on the University of New Brunswick campus was named in her honor.

## 1968-1970

**IRENE LECKIE's** terms were filled with exciting and controversial events. On June 15, 1969, 90% of the New Brunswick hospital nurses submitted their resignations giving one month's notice. The nurses signed their first contract through voluntary negotiations with government and the responsibility for collective bargaining was transferred to a Nurses Provincial Collective Bargaining Council. A nurses \$373 a month starting salary was raised 15% to \$430 per month. When nurses passed their 1970 resolutions in MacLaggan Hall, UNB, they stressed the need for malpractice insurance. Membership now exceeded 5000. The president's address, "The Extended Role of the Nurse in the Community," was translated simultaneously for francophone nurses. From 1978-1983, Irene Leckie was dean of nursing at the UNB Fredericton Campus. She was given the title Professor Emerita in 1984.

## 1970-1971

**HARRIETT HAYES** spoke on "Patterns of Health Care in New Brunswick" at the 55th annual meeting held at the Holiday Inn, Saint John. Issues of note were the expanded role of nurses, their rights in giving care to patients having abortions, and malpractice. Nurses discussed the Lewellyn Davies Report. The Association petitioned the Department of Health to eliminate the *Hospital Protection Act* because it placed nurses in a vulnerable position. Recommendations were made for more public education on the Association's role. The first two-year independent diploma school of nursing was established in Saint John in 1970. This was the year that Catherine Bannister's NBARN "Flower Power Committee" hosted the CNA 35th national meeting for 1,265 nurses.

## 1971-1973

**APOLLINE ROBICHAUD**, the first Acadian president, travelled to the Edmundston annual

in 1972. That year, described as a year of crisis, shock and decisions, saw the first non-nurse as a member at the Board. Committees studied the LeDain, Hastings and Boudreau Reports. The Saint John School of Nursing graduated its first class. The theme of the 1973 annual in Moncton was "Primary Health Care" and the concept of nurse practitioners was reviewed in detail. Nurse-representatives travelled the province to talk about closure of hospital training schools.

### 1973-1975

**BERNADETTE LEBLANC**, currently a judge in the New Brunswick courts, welcomed nurses to Bathurst for the yearly meeting in 1974. The 58th gathering, "Riding the Crest of Change," featured a stimulating keynote speaker in the person of Dr. M. Josephine Flaherty. Rumblings of the members at the 1975 meeting at the Algonquin Hotel, St. Andrews, centered around the government's announcement of a freeze although nurses' salaries had already been agreed upon. A study on nursing practice, documents on primary care and education for the expanded role of the nurse were available. By 1975, psychiatric nursing had become a requirement for all New Brunswick graduates. That year the NBARN presented a gift to CNA House: an original New Brunswick craft, a pewter wall-hanging titled "Fiddlehead Sunrise."

### 1975-1977

**SIMONE CORMIER** emphasized marketing and lobbying when nurses met at the Playhouse, Fredericton, in 1976. They also discussed a 300-bed closure and its impact on nursing employment. The first mail vote was received. Nurses were learning to speak with one voice through their union and their Association as they shared in a "Day of Protest" on October 14, 1976. Nurses at the Diamond Anniversary Meeting, pondering the "good old days," were told that, sixty years back *any nurse who smokes, uses liquor in any form, gets her hair done at a beauty*

*shop or frequents dance halls will give the director of nurses good reason to suspect her worth, intentions and integrity.* The transition of nurse education from three to two-year diploma schools was completed in 1977 when the NBARN held its annual meeting at the Restigouche Senior High School, Campbellton. NBARN pledged support for improving standards of mental health in the province by recommending to government the need for a provincial consultant in psychiatric nursing. Gemma Therrien, a nurse from St. Basile, designed a winning logo — lamp with fiddleheads — that became the Association's permanent symbol.

### 1977-1979

**JUDITH OULTON**, currently executive director of CNA, participated in her first annual meeting as president of the NBARN in Saint John in 1978. The challenging theme "Nurse, Would You Dare To Be A Patient?" brought major press. The Winds of Change blew at the 62nd annual meeting when she urged members to *think change or go into dry rot.* They were warned that factors at play at the government level can have a profound effect on nursing. Nurses were encouraged to continue lobbying to improve mental health services. The Association approached the government to make reporting of child abuse mandatory. NBARN responded to the Task Force on New Brunswick Health Care, a report based on the traditional physician-centered delivery system. The Association advocated greater use of nurse power to offset health care costs. A brief to Health Services Review stressed that more dollars be earmarked for health promotion. The system of voting by proxy stirred heated debate at the 1979 annual held at the Beauséjour Hotel, Moncton.

### 1979-1981

**ANNE THORNE** presided over the "Nurse Power in the 80s" annual meeting where nurses voted to implement malpractice coverage. They

reluctantly voted to raise the professional fees from \$80 to \$105. The annual was held at Keddy's Motor Inn, Fredericton, in 1980. Proxy voting was first used by members at the Howard Johnson Motel, in Edmundston, in 1981. Resolutions covered mandatory seat belt legislation and pituitary gland retrieval. Membership implemented the recommendations of their Structure and Functions Report that acknowledged the nurse's point of view and the practical realities of the day.

### 1981-1983

**REV. SR. ERNESTINE BOUDREAU's** first annual as president was in 1982. Nurses at that meeting were sharing personal views on the baccalaureate as a minimum for entry to practice. A survey of 1723 members indicated satisfaction with the Association. Dr. Carolyn J. Peplar, a distinguished nurse educator who played an active role on the NBARN advisory committee on the education of nurses, became the third Canadian to win the 3M ICN international educational fellowship. In 1983 NBARN's annual program theme was "Primary Nursing." Members reacted to Bill 44, a law to regulate health disciplines, and lobbied against it. Nurses at the Saint John annual rallied in reaction to the Emmett Hall Commission, and the fact that nurses now needed a total of 450 work hours over the preceding three years to qualify for membership. In her last term of office, Sr. Boudreau urged members to share their ideas for revisions to the *NBARN Act of Incorporation*.

### 1983-1985

**MARY ELLEN DRISCOLL's** presidential highlight was the 1984 Moncton meeting. The membership took pride in the nursing lobby to enact the *Canada Health Act*. Nurses in the south, middle and north of the Province hailed the successful election of members Leslie McColgan, Clara Moffatt and Jessica Ryan to municipal politics. The Association had a new name and boasted the Legislature's enactment of

the *Nurses Act*, on which the president had laboured untiringly during her term of office. The organizational structure was reviewed; resolutions focused on health and lifestyle issues. Board members and executive received salary replacement when the annual met in Bathurst in 1985. Proxy voting was being utilized to its fullest.

### 1985-1987

**YOLANDE CYR's** first annual in 1986 was held in Fredericton. Nurses were looking to the Year 2000 when the baccalaureate would become the entry point into the profession and continuing education was a priority. She chaired the 1987 annual meeting remembered as the Association's most explosive on record. Debate raged on a resolution that called for the establishment of a bachelor of nursing as the minimum requirement for nurses' entry to practice. At the 1987 meeting, also held in the Capital, the educational needs of nurses took priority over the discussions. Nurses were told that they must make a ... *decision today for the practice of tomorrow*.

### 1987-1989

**CARROLL ANN O'LEARY** spoke diplomatically to members who reacted to the entry to practice guidelines at the annual meeting again located in Fredericton. Nurses expressed concern about their quality of worklife and its effect on the safety of patient care. They discussed their role in Aids, ethical issues and the verbal transmission of prescriptions. Educational sessions were conducted on "Code Grey," promoting the adoption of the *CNA Code of Ethics*. The Department of Health and Community Services was called upon to curb erosion of the roles of both public health and mental health nurses. Nurses were increasing their advocacy for organ and tissue donation. At the 1988 annual meeting, as a result of intense educational efforts and a successful information

campaign, members voted in favor of a new educational entry point for the future. In 1989 the Association's first nursing practice conference affirmed nurses' collective ability to shape the future of their practice.

## 1989-1991

CLAIRE LEBLANC's first annual meeting, as president, was in Moncton. Members discussed the implications of the McKelvey-Levesque Report, a Government document that analyzed the health care system in New Brunswick and proposed changes but failed to place sufficient emphasis on the potential expansion of the role of the nurse. The Association also reacted to the Report of the Commission on Selected Health Care Programs. The NANB's *Statement on Medical-Nursing Procedures* was highlighted and a committee was appointed to review the Association's structure. It was during this presidency that members voted on the first long-range fiscal plan, which eventually laid the ground work for the purchase of New Association headquarters at 165 Regent. New Brunswick nurses were represented on the Board of the Canadian Nurses Protective Society and had access, through a toll-free number, to a lawyer. Members voiced their commitment to assure quality nursing care for the people of New Brunswick. When they entered the new year, nurses were evaluating their quality of worklife in co-operation with the Department of Health and Community Services who looked for ways to improve nurses' job satisfaction. History describes N.B. nurses as a patient lot. But as the concerns of their foremothers (a nurse's health and welfare and her education) are reawakened again, the patience of nurses is being tried. A successful lobbying effort by nurses produced a commitment by Premier Frank McKenna to support an all BN education for nurses by the year 2000. The 1991 annual meeting was aptly called "Changing Direction and Directing Change." True to form, as one meeting closed, plans were enthusiastically underway for

another meeting — the 1992 biennium of the Canadian Nurses Association in Saint John.

TITRE DE LA CHANSON: A pleines voiles vers le Nouveau-Brunswick  
TITLE OF THE SONG: Sail into New Brunswick

Chanson sur l'air de "Rame, Rame"  
Sung to the tune of



Vogue, vogue, vogue en bateau . . . . . Vers Nouveau-Brunswick là où il fait beau



Sail and sail toward New Brunswick . . . . . To discover hospitality and friendship



Nurses partiront des quatre coins dy pays. Pour partager la Biennale Nationale



Together we'll share because all nurses care. Wisdom and knowledge will be part of a pledge



United, unis en déontologie . . . . . And fun it will be in Saint John you'll see



L'A.I.N.B. désire vous souhaiter . . . . . Bienvenue chez nous N.A.N.B. welcomes you

Composé par Bertha Godin, inf.  
Composed by : Bertha Godin RN

Theme song for the 1992 Biennium, composed by Bertha Godin, for NANB, in 1989.

Awards  
Bursaries  
Life Members  
Honorary Members



**N**ursing has always been the backbone of community service and its respect and appreciation for the contribution of other health workers lies deep. History has also taught the NANB the value of publicly recognizing other people's service as well as the need for nurses to support one another's aspirations and achievements. Awards of merit are conferred, annually, to nurses and members of the general public who have contributed to consumer health and nursing.

## Awards

Each nurse will one day vanish into the past, but she will leave her mark. Many nurses, whose careers bear testament to an active involvement in nursing affairs, could not have pursued the path they took without financial support. The NBARN set up its first scholarship fund to be awarded to nurses for *an academic course* in 1938. In 1939, Mary E. Squibb of Saint John was the initial recipient of the award. In 1963, a special scholarship committee was set up to study the feasibility of establishing annual scholarships and to outline terms of reference — \$2,000 was allotted. In 1989-1990, the NANB awarded \$9,000 to nurses and nursing students in pursuit of nursing education and research.

## Bursaries

A student loan fund was established in 1956 for worthy New Brunswick nursing school students. Forty-five nurses utilized this interest-free loan, payable over a three-year period, before it was withdrawn. In 1963, the Association added two new scholarships, valued at \$1,000 each. One of them, the Muriel Archibald Scholarship, is in memory of past executive secretaries of the Association.

In 1991, the NANB bursary committee awarded bursaries to nurses, or nursing students, studying on a full-time basis. The following is a listing of bursaries available:

- the Muriel Archibald Bursary: amount variable between \$500 and \$1,500;
- the master's or doctoral bursary: amount variable between \$1,000 and \$2,000;
- the NANB bursaries: amount variable between \$500 and \$1,250;
- basic, short-term course bursaries: amount variable between \$250 and \$500; and
- bursaries to part-time students: amount variable between \$1,250 with a minimum of \$500.

The New Brunswick Nurses Foundation, of which Jessica Ryan was the first chairperson, was created in 1988. This Foundation awarded bursaries to four New Brunswick nurses for the first time the following year. These bursaries are granted to nurses, or nursing students, who are studying on a full-time basis. The amount to be awarded annually is based on the funds available and the number of qualified applicants. Bursaries are divided into the following categories: the post-basic baccalaureate bursary, master's or doctoral bursary and basic baccalaureate bursary.

The NANB has the distinction of having made the first annual donation to the Canadian Nurses Foundation, the national organization promoting nursing education. This is a fund for Canadian nursing research and for nurses working on a master's or doctoral degree.

## Life Memberships

Recognition of good nursing is also an important part of a strong professional feeling among nurses. The NANB recognizes members with life memberships. Nurses must meet specific criteria and are selected for their involvement in nursing at local, provincial and national levels. Formal guidelines for life and honorary memberships were recommended in 1970. The first committee to review the recommendations was co-chaired by nurses Lois Gladney and Alice Crewdson.

Life members represent nurses who give their relentless energy, wholeheartedly, who have the foresight to identify issues of concern for nurses, and who have the perseverance to uphold

standards. They are the mentors and role models for other nurses.

To qualify for life membership, the nurse must be a member or former member of NANB, have retired from full-time nursing, have made a substantial contribution to nursing in New Brunswick and have met at least two of the following criteria: served as NANB president for two or more years; served on NANB Board for four or more years; been an outstanding nursing leader in New Brunswick in an area such as education, service, administration, public health or a specialty area; served nursing at the national level for two or more years (other than as provincial president); and performed any other activity or circumstance which the Board believes brings honor to nursing.

## Life Members

1918

**Arthuretta Branscombe**, Beaver Lodge, Alberta: Miss Branscombe was the first President of the Graduate Nurses Association of New Brunswick.

**Elizabeth Robinson Scovil**, Saint John: She was the author of several books on child care.

1955

**Alma F. Law**, Fredericton: Miss Law received the first life membership of the NBARN. A citation to honor this secretary/registrar of thirteen years reads — *The Association is richer because of Miss Law's work in it and for it.*

1956

**M. Gertrude Jones, Alberta L. Burns, Ada Burns, Margaret Murdoch, Mildred P. Vaughan, Margaret L. McKelvey and Helen B. Hoyt**: The biographies of these seven charter

members of NBARN are in the Provincial Archives, along with their letters of gratitude for this award. They wrote that when they planted that small acorn, forty years before, that they were incapable of foreseeing the Great Oak into which it had become.

1961

**Marion Myers**, Saint John: Miss Myers spent sixteen working years in the Teaching Department of the Saint John General School of Nursing and thirteen years as director of nursing at the Saint John Tuberculosis Hospital. She was a first vice-president of CNA and president of NBARN from 1944-48. She was also active in the committee work of the Association.

1966

**Rev. Sr. Annette Bujold**, Bathurst: Sister Bujold used her teacher-training in her work as director of the School of Nursing in Campbellton and superior and administrator of the Hôtel-Dieu, Campbellton from 1933-1946. She held many offices in the NBARN including being a member of the board of directors and is remembered for her work as chairperson of the committee for the provincial nursing assistants association.

1963

**A. Jean MacMaster**, Moncton: Alina Jean MacMaster was superintendent and director of nursing at Soldier's Memorial Hospital, Campbellton, and the Moncton Hospital from 1919 until 1947. A president of the NBARN, she was decorated in 1932 with the Silver Jubilee Medal by his Majesty King George V. Miss MacMaster was a pioneer of nursing education in Moncton, with special interest in standardization of nursing examinations. During forty-four years of nursing, she

maintained a leadership role in administration, nursing service and education. She held office in regional, provincial and national nursing associations. The Moncton English-language school for nurses is named in her honor.

1966

**Rev. Sr. Corrine Kerr**, Saint John: Sr. Kerr of the Religious Hospitallers of Saint Joseph was one of the first class of nurses to graduate from the Hôtel-Dieu Campbellton School of Nursing in 1922. She was director of the school from 1927-1933 and organized their alumnae. She was involved in the dialogue on registration of subsidiary workers. Sr. Kerr helped the Association guide nurses through the difficult war years. She maintained that ... *great things are made up of many littles.*

1966

**Muriel E. Hunter**, Florenceville: As president of the NBARN and as director of public health nursing, she played a vital role in the lives of people in New Brunswick, particularly in grafting the principles of community health care services to the stem of prevention.

1968

**Isabel Lane**, Fredericton: She was the Association's nursing school advisor. She fostered positive relations with the training schools from 1951-1959. Miss Lane was notified that she would be given a life membership, but died before the award ceremonies in 1968.

1968

**Rev. Sr. St. Charles**, St. Basile: She was founder of the school of nursing at St. Basile and

was involved with the beginnings of the nursing school in Edmundston.

1968

**Sarah Miles**, Rothesay: A nursing sister in World War II, she served in Italy and made the Trans-Atlantic run in hospital ships transporting wounded troops. She was Matron of the D.V.A. Hospital in Saint John and active with the Girl Guides of Canada.

1969

**M. Jane Stephenson**, Maugerville: Appointed director of nursing of the Saint John General Public Hospital in 1950, she was a pioneer in nursing education in her school and became an Association president.

1969

**Lois O. Smith**, Saint John: She was president of the NBARN and director of nursing of the Provincial Hospital, Saint John, for sixteen years. Miss Smith worked diligently to improve the status of nursing.

1970

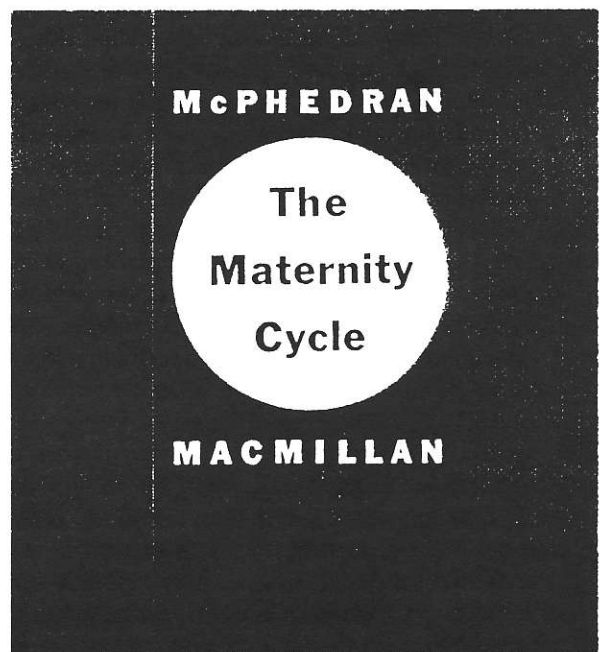
**Rev. Sr. Mary Winslow**, Chatham: Entering the profession in 1934, Sr. Winslow was a former director of nursing at the Hotel Dieu, Chatham.

1970

**Rev. Sr. Bernice LeBlanc**, Vallée Lourdes: Sr. LeBlanc, also known as Sr. Saint Joseph, served nursing as a practitioner and administrator. She was an honorary secretary of the Association and provided the NBARN with valuable written translation services.



Margaret McPhedran, first dean of the UNB Faculty of Nursing, 1968.



*Maternity Cycle* written by Margaret McPhedran acknowledges her gratitude to colleagues K. MacLaggan and Irene Leckie.

1970

**Bertha Gregory MacDougall**: She worked with Red Cross immigration nursing at the Port of Quebec City. In 1921 she was presented a ribbon for representing NBARN at the joint convention of CNA Trained Nurses and the Canadian Association of Nursing Education, Quebec.

1971

**Lois Gladney**, Fredericton: Mrs. Gladney joined the NBARN in 1957 as assistant to the secretary registrar. She gave eleven years of outstanding service to the NBARN and was the first full-time registrar.

1973

**Rev. Sr. Helen Marie (Darrah)**, Saint John: Sr. "Darrah" served as honorary secretary for the NBARN and chaired the nursing education committee. She worked in the dietary departments of several Canadian hospitals and was a former director of Saint Joseph's Hospital School of Nursing from 1948-1967 where dramatic changes took place in educational standards. She was administrator at Mater Misericordiae Home. Sr. "Darrah" worked closely with the Canadian Red Cross and the Social Services Department of New Brunswick.

1973

**Grace Stevens**, Fredericton: A president of the NBARN, she was a pioneer in the social welfare of New Brunswick nurses. She was a member of the Army Nursing Corps and was instrumental in organizing the VON in Edmundston. Grace Stevens was an industrial nurse with Fraser Companies Ltd. when she joined the NBARN as an employee in 1967. She

travelled the province and met nurses in their workplace.

1976

**Anna Christie**, Fredericton: An education consultant who worked with schools of nursing, registered nursing assistants and provincial hospitals, her varied nursing background was acquired in several countries.

1976

**Margaret MacPhedran**, Fredericton: She was awarded the Queen's Silver Jubilee Medal in 1968. Well known for her role in helping to establish the UNB school of nursing, she was appointed the first dean of nursing, filling the position until 1983. She was made honorary Professor Emerita in 1976. Her contribution to the NBARN was largely in the area of continuing education. She was author of *The Maternity Cycle*.

1978

**Margaret MacLachlan**, Cornwall, Ontario: She was the first teacher of community health at the UNB school of nursing (1961). Her nursing career was described as having ... *single-hearted devotion, enthusiasm, unstinted expenditure of time and energy to teach the gospel of health*. Miss MacLachlan was honorary-secretary of NBARN and chaired the legislation committee. She was a board member of the Victorian Order of Nurses.

1979

**M. Jean Anderson**, Fredericton: Miss Anderson is holder of the Queen's Silver Jubilee Medal and is a former director of nursing, Victoria Public Hospital, Fredericton. She was

also executive secretary of the NBARN from 1968 to 1976 and a president of the Association. She was the first woman elder of Saint Andrew's Presbyterian Church Fredericton.

1979

**Doris Grieve**, Fredericton: She used her wide experience in nursing administration and education to assist in the Association's work as a member of the nursing service committee. She served for nineteen years as nurse consultant at the Department of Health.

1979

**Apolline Robichaud**, Moncton: She was the first Acadian president of the NBARN. Holder of the Queen's Silver Jubilee Medal, awarded for distinguished and meritorious service to the Canadian people, she was a teacher and health educator at the Provincial Teachers College. As a former director of public health nursing for New Brunswick she placed great importance on the healthy family unit.

1983

**Audrey Stanley**, Saint John: She was honorary secretary of the Association and a long-term night supervisor at the Saint John General Hospital.

1984

**Harriett Hayes**, Moncton: This president of the NANB was the first director of the Miss A. J. MacMaster School of Nursing, a two-year diploma school in Moncton.

1985

**Elizabeth Lowe**, Renforth: She was among the first N.B. nurses to serve overseas, and received the International Florence Nightingale Award in 1984. Her public health nursing background provided diverse opportunities including development of the first nursing assistants program at the Saint John Vocational School in 1960. As director of nursing services for the New Brunswick Red Cross Society (1964-1981), she implemented Home Nursing and Seniors Programs.

1985

**Irene Leckie**, Fredericton: Miss Leckie left the Prairies and made Fredericton her home. She was one of the first faculty members at the UNB school of nursing, Fredericton. From 1959 to 1978 her focus was on the development of medical/surgical nursing. She was dean of the school from 1978-1983. A former president of NBARN (1968-1970), she is an avid supporter of community causes.

1986

**Anne Thorne**, Saskatchewan: She was director of the first two-year diploma school in N.B. She was president of the NANB and was involved with the development of the roles and functions review of nurses.

1988

**Simone Cormier**, Campbellton: Mrs. Cormier was a director of the Hôtel-Dieu School of Nursing, Campbellton, and a president of the NANB who served on the steering committee to study the transition from school to workplace for two-year diploma graduates.

1988

**Margaret Richardson**, Moncton: Mrs. Richardson was active in the VON, the Moncton School of Nursing and the Department of Health. She served on several NBARN committees.

1989

**Katherine Wright**, Sackville: A president of the NANB, and also director of nursing at the Moncton Hospital, she was awarded the Queen's Silver Jubilee Medal for work with the Saint John Ambulance.

1990

**Rev. Sr. Céline Doucet**, Bathurst: Sr. Doucet was director of the school of nursing at the Hôtel-Dieu Campbellton from 1960-1963 and 1965-1970. She was well known for her role with pastoral services at Chaleur Regional Hospital, Bathurst.

1990

**Rev. Sr. Dorina Frigault**, Tracadie: Sr. Frigault was former director of nursing at the Hôtel-Dieu St-Joseph Hospital. She worked in the field of alcoholism and organized a museum in memory of sisters who worked with lepers.

1990

**Nellie Leland**, St. George: Miss Leland was a nurse role model to young women as she practised a long career in community nursing in Charlotte County, N.B.

1991

**Shirley MacLeod**, Fredericton: She contributed enormously to nursing practice and nursing education throughout her career as an educator. Her involvement in nursing spanned the local, provincial and national nursing scene.

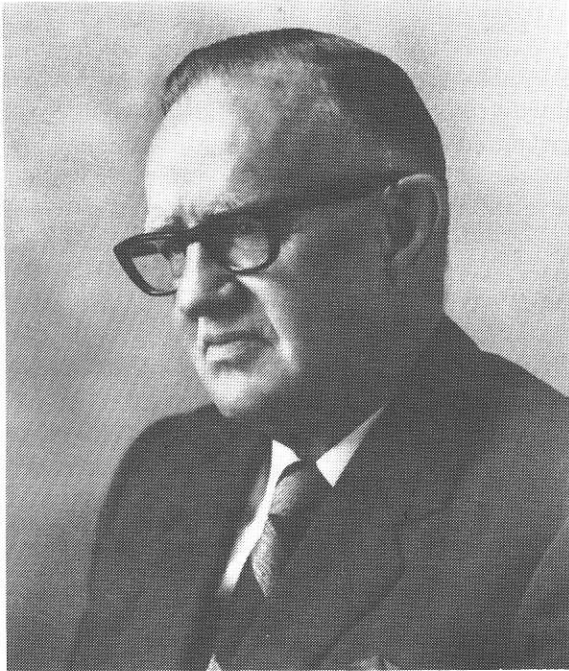
1991

**Zeta Hawkes**, Sussex: Miss Hawkes received a life membership for her unfailing service to the profession. Serving on the NANB board of directors for six years, she worked on a number of key nursing committees at the provincial and national level during the 70s.

## Honorary Memberships

Since its early beginnings, the NANB benefited from the friendships of many women and men who supported its endeavours and espoused the nursing philosophy. The Association is deeply grateful to those who provide guidance and help to promote its aims. Those supporters, whether nurses or non-nurses, are nominated by the membership through their chapters and are honoured at special functions.

To qualify for honorary membership, a candidate: may or may not be a nurse; is not or has not been a member of the NANB; has rendered valuable assistance to the organized profession at the provincial level; has supported the Association publicly in its endeavour for recognition; or in some significant manner brought honour to the nursing profession at the provincial, national and international level.



Dr. Austin M. Clarke, first non-nurse to participate in the NBARN Council.



Rev. Sister Léa Audet gave a lifetime of service to nursing.



Rev. Sister Anastasia Carroll was instrumental in developing nursing schools in northern New Brunswick.



Elizabeth Lowe receiving the IRCS Florence Nightingale Medal, 1983.



## Honorary Members

1956

**E. Kathleen Russell:** She was a distinguished Canadian nurse educator who studied the ways and means of re-organizing nursing education in N.B. Her report *A Survey of Nursing Education in N.B.* was published in 1956.

1962

**Dorothy Percy,** Ottawa: She was chief nursing consultant of the Department of National Health and Welfare. Miss Percy provided wise counsel to nurses and took a personal and professional interest in the development of nursing education in New Brunswick.

1964

**Rev. Sr. Anastasia Carroll,** Campbellton: Sr. Carroll was organizer and director of the Hôtel-Dieu School of Nursing, Campbellton, from 1920 to 1921. She aided in the reorganization of the Hôtel-Dieu School of Nursing, Montreal, and in the development of the schools of nursing at Bathurst and St. Basile.

1964

**Rev. Sr. Leà Audet:** Mother Audet was well known in the Maritimes and Quebec for her involvement in nursing education and for sending nurses for specialized training. She spent twenty-seven years as a superior and administrator of hospitals in Campbellton, Sorel, Quebec and Bathurst. She was associated with professional nursing associations from 1921 to 1963 inclusive and attended two international conferences in Rome.

1968

**Dr. Austin M. Clarke,** Moncton: Dr. Clarke was executive-director of the Moncton Hospital for fifteen years. He was the first non nurse appointed to NBARN Council in 1973 and the first man honored by the NBARN. He had a vast knowledge and interest in health affairs, holding various positions in public health in New Brunswick.

1970

**Dr. W. C. Argue,** Fredericton: A Professor Emeritus, Dr. Argue was the dean of science and head of the UNB biology department. He devoted much time to nursing, particularly in 1958, when he was one of the key persons in the establishment of the UNB school of nursing, Fredericton.

1980

**Dr. Helen Mussallem,** Ottawa: She developed close ties with the NBARN. A past executive director of CNA, she was the first Canadian nurse to receive the Columbia University Teachers College Medal for distinguished service. She is an international and national spokesperson on nursing and health care issues.

1980

**Edith B. Pinet,** Paquetville: This woman provided years of independent nursing service and was remarkable in the field of human endeavour on the Acadian Peninsula. She is a recipient of the Order of Canada and has been recognized widely for her midwifery.

1988

**Euclide Daigle**, Dieppe: Mr. Daigle carried out valuable pioneering work in the field of French/English nursing vocabulary.

1989

**Judge Chaiker Abbis**, Edmundston: Judge Abbis undertook comprehensive work in nursing education, serving as chairman of the study committee on nursing education, 1970.

1991

**Arthur Doyle**, Fredericton: Mr. Doyle's interest in nursing was cultivated when he sat as a public member on the Association's 25-member board of directors. He is an outspoken advocate of the nursing profession and was a frequent advisor to the NANB board of directors.

1991

**Harvey Malmberg**, Fredericton: Mr. Malmberg received an honorary membership for his work in promoting the future educational needs of nurses in New Brunswick. He was a member of the NANB task force on future nursing education.

## Awards of Merit

Certificates of merit are awarded to nurses, and others, who have provided outstanding services and exceptional contributions in advancing nursing in New Brunswick. Recipients are recognized for promoting the welfare of the nursing profession and the citizens of New Brunswick. The first awards were presented at the 75th anniversary meeting in Fredericton in May 1991.

1991

**Lucille Auffrey**, Fredericton: She was recognized for her work as executive director from 1985 to 1991. Ms. Auffrey, lobbied for the entrenchment of professional nursing standards for nurses and helped shape the Province's health-care policy and health reform.

1991

**Arlee McGee**, Fredericton: An educator and advocate of patient rights, Mrs. McGee was the first nurse ombudsman in the Province. She is a pioneer in addiction nursing and was instrumental in establishing the role of nurses in alcohol treatment centres in the Province. As independent nurse practitioner, Mrs. McGee works to preserve nursing history.

1991

**Madeleine Steeves**, Fredericton: A president of the New Brunswick Nurses Union for eight years, Mrs. Steeves was honored for her contributions to the socio-economic welfare of nurses. She is a labor relations officer with the Nurses Union and a member of the New Brunswick Advisory Council on the Status of Women.

1991

**Dr. Shirley Alcoe**, Fredericton: Dr. Alcoe was a recipient of the National Volunteer Award for her work as a nurse educator, practitioner and researcher in the field of cancer care and control. A former professor of nursing at the University of New Brunswick, she contributed significantly to the field of community health nursing.

1991

**Bonny Hoyt-Hallett**, Mouth of Keswick: Mrs. Hallett is a former executive director of the Association. She is recognized for her leadership during the passage of the *Nurses Act* in 1984. In 1991, she was acting executive director, planning and evaluation division, Department of Health and Community Services.


1991

**Rachel Bard**, Moncton: A director of primary services for the Mental Health Commission of New Brunswick, Mrs. Bard distinguished herself through her lobbying efforts during the passage of the *Nurses Act* and also for defining the future educational needs of nurses. She served as co-chair of the Association's Task Force on Future Nursing Education.

1991

**Pauline Rivard**, Penniac: Mrs. Rivard is a former registrar of the Association. She is recognized for her lobbying efforts during the passing of the *Nurses Act*. Currently, Mrs. Rivard is a project executive with the Regional Development Corporation.

Schools of Nursing  
In Pursuit of a Vision



**THE FLORENCE NIGHTINGALE PLEDGE**

*I solemnly pledge myself before God and in the presence of this assembly to pass my life in purity and to practice my profession faithfully. I will abstain from whatever is deleterious and mischievous and will not take or knowingly administer any harmful drug. I will do all in my power to elevate the standard of my profession, and will hold in confidence all personal matters committed to my keeping and all family affairs coming to my knowledge in the practice of my calling. With loyalty will I endeavour to aid the physician in his work and devote myself to the welfare of those committed to my care.*

The Florence Nightingale Pledge was written by Lystra E. Gretter of the Ferrand School of Nursing, Detroit.



Store window decorated by NBARN staff on International Nurses Day, May 12.

On May 12, Florence Nightingale's birthday, nurses in New Brunswick celebrate International Nurses Day and take time out to reflect on their beginnings. At one time in New Brunswick, there were fourteen hospital schools of nursing influenced by Miss Nightingale's efforts to establish nursing as a profession. This system of training nurses provided hospital administrators with a constant supply of nursing students. Two of the earliest hospital-based schools of nursing in New Brunswick were the Saint John General in Saint John, which opened in 1888, and the Victoria Public Hospital in Fredericton.

A Mrs. Jane Higgins was an 81-year-old matron at the Saint John Public. It is recorded that she wore a black dress with a long train on which *rode majestically a small pet dog*. In 1992, nurse Eliza P. Hegan, one of the first graduates of the General Public Hospital, organized the first private hospital in the city.

Graduate nurses branched out from the training schools into private practice and district nursing. In 1915, Rev. Sr. Veronica established a school of nursing that made nursing students the foundation of the Saint John Infirmary. Religious Sisters of the Hospitallers of Saint Joseph organized schools in the North of the Province. The foresight of the graduates of the training schools kept New Brunswick hospitals progressive.

Up until 1916, student nurses were required to have two consecutive years training in a hospital with a daily average of fifteen occupied beds. With the first nursing act, the length of training for all nurses was changed to three years. The NBARN placed great emphasis on the educational preparation of its nurses. This was evident in 1918 when directors of nursing were reluctant to send students to affiliate in tuberculosis hospitals that did not have nurse-supervisors. They were concerned with the exploitation of students, under the guise of training, maintaining that *... if a nurse is overworked it impairs her ability to study and hinders her progress in the theoretical side of the*

*profession*. The protection of the public was a priority, therefore, nurses had to be qualified and registered. The Association established a registry and on March 26 and 27, 1919 in Saint John, the first examinations were held for New Brunswick nurses. Nurses struggled to standardize nursing texts and courses and in 1925 introduced a proposed minimum curriculum. The 1931 *Annual Report of the Victoria Public Hospital*, Fredericton, told of the hardships of students: *The quarters of the student nurses were overcrowded and in many respects very undesirable for residence, which was a detriment to the efficiency of the nursing body and the well-being of the patients*. It was not until 1954 that student nurses at the Saint John General School of Nursing received a full day off duty during the work week.

In 1932, public studies recommended that schools of nursing be transferred from hospital-based services to educational settings — the object being to prepare nurses to meet the health needs of a changing society. Influenced by the recommendations of Dr. George Weir's 1932 *Survey of Nursing Education in Canada*, the Association furthered its task of improving nursing education, directing it toward the educational system of the Province. The NBARN supported the three-year hospital training hospital in an advisory and visiting capacity. "School visiting" was undertaken and, in the late 1930s, Maude Retallick became involved with this program. There were fourteen schools with a total enrolment of 175 student nurses to oversee. The NBARN approached the provincial Department of Education in 1938 to incorporate organic chemistry into the high school chemistry course to meet the requirements of the new curriculum for nursing schools. Its mission became more clear in 1947, when Dr. Katherine E. MacLaggan chaired a committee on education, which included representatives from other groups. Hon. Dr. W. C. Argue, Dean of the Faculty of Science, UNB, was a strong advocate of nursing education during this phase but many of the training schools were too small to meet the Canadian Standards of Nursing Education. In

1950, qualifying exams were inaugurated to establish a provincial standard for nurses and continued for nine years. Isobel Lane developed a personal interest in the students as the nursing school advisor employed by the Association in the mid 50s.

The *Wright Report* in 1951 examined provincial nursing conditions and recommended the establishment of a nursing school at the University of New Brunswick. Dr. E. Kathleen Russell was hired to study nursing education in New Brunswick and her 1956 report served as a guide for reorganizing the schools of nursing. Margaret McPhedran, chairperson of the committee on nursing education operating outside of hospital control, summed up her 1963 findings by saying: *Nursing has changed, and schools should change with it.* In 1959, a grant from the W. Kellogg Foundation made the establishment of the first university school a reality. In 1965, a study by Dr. MacLaggan described a system for educating nurses, including a method of implementation requiring public support. School improvement programs were introduced and, in 1971, Rev. Sr. Florence Darragh chaired the advisory committee to the schools. When it became clear that a different approach to nursing was necessary, movement away from the traditional schools brought painful years for the NBARN. Anna Christie, NANB educational consultant (1962-1975), who coordinated a refresher course for inactive nurses, later participated in the transition from hospital to two-year diploma programs. She and Marilyn Brewer were the ambassadors who set forth to introduce the changing direction of nursing to the hospital authorities in conjunction with local chapters. Theirs was a dual purpose: to discuss changes in nursing education and collective bargaining for nurses. This became an arduous crusade when they attempted to convince hospital administrators. At the height of the debate for change, there were eleven training schools to be closed. The St. Joseph's School of Nursing, Hôtel-Dieu, Campbellton, the first school of nursing in northern New Brunswick, and the first in the province opened

by the Hospitallers, was one of the last of their hospitals to close its doors.

## Three-year, hospital-based schools

**Soldiers Memorial, Campbellton** (English)  
Closure: 1959.

**Hôtel-Dieu, Tracadie** (French)  
Closure: 1963.

**Charlotte County Hospital, St. Stephen** (English)  
Closure: 1967.

**St. Joseph's Hospital, Saint John** (English)  
Closure: 1971.

**Carleton Memorial Hospital, Woodstock** (English)  
Closure: 1971.

**Saint John General Hospital, Saint John** (English)  
Closure: 1972.

**Miramichi Hospital, Newcastle** (English)  
Closure: 1972.

**Hotel Dieu Hospital, Chatham** (English)  
Closure: 1973.

**Victoria Public Hospital, Fredericton** (English)  
Closure: 1974.

**Hôtel-Dieu, Edmundston** (French)  
Closure: 1974.

**Moncton Hospital, Moncton** (English)  
Closure: 1976.

**Chaleur Regional Hospital, Bathurst** (Bilingual)  
Closure: 1975.

**Hôtel-Dieu de St-Joseph, Campbellton**  
(Bilingual)  
Closure: 1975.

**Dr. Georges L. Dumont Hospital, Moncton**  
(French)  
Closure: 1976.

*Reflections*, a book written by nurses Margaret McPhedran, Irene Leckie and Shirley Alcoe, describes the development of nursing education from 1958-1983 as it pertains to the first university school of nursing at UNB, Fredericton.

*Le Premier Quart de Siècle* (The First Quarter Century), a history of L'Ecole des sciences infirmières, Université de Moncton, was published in 1990 as part of the 25th anniversary celebrations.

By virtue of provisions of the *Nurses Act*, NANB has the legal authority for schools of nursing and approval of their programs. Associated legislation provides for an advisory committee on the education of nurses.

One strength of nursing education in New Brunswick lies in its geographical accessibility in five regions of the province. There are presently two university schools of nursing. The University of New Brunswick faculty of nursing admitted its first class of English-language students in 1959. The University of Moncton school of nursing admitted its first French-language students in 1965. Both universities offer an integrated basic four-year bachelor of nursing, where today's new recruits and oldtimers plough through their nursing degrees.

There are five, one-hundred-week, diploma schools of nursing — two offer French-language courses and two offer English. The Bathurst school offers courses in both languages. The New Brunswick Student Nurses Association (NBSNA) was formed after a special session for students was held at the annual in Woodstock in 1958. Audrey Cheeseman, Saint John General Hospital, was the first president. The NBSNA is an active group which holds its annual meeting conjointly with the parent Association.

## University schools

**University of New Brunswick School of Nursing (1959)**  
First director: Dr. Katherine MacLaggan

**University of New Brunswick Faculty of Nursing (1968)**  
First Dean: Margaret McPhedran  
1991: Dean Penny Ericson.

**University of Moncton School of Nursing (1965)**  
First director: Jacqueline Bouchard-Léger  
1991: Director Jeannette Doucet.

## Diploma Schools

A Central Application Centre was established in 1973 to serve as a clearing house for all enquiries and applications to diploma schools of nursing in New Brunswick. The academic requirements for admission to diploma schools are established by the NANB.

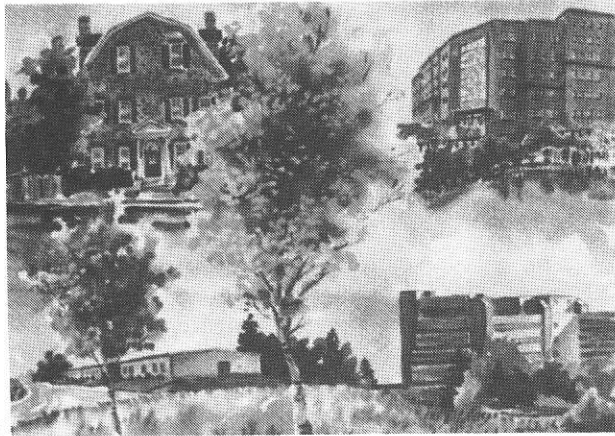
**BATHURST (bilingual) — École d'infirmières de Bathurst School of Nursing (1976)**  
First director: Connie Morrison  
1991 director: Connie Morrison

**EDMUNDSTON (French) — École de formation infirmière d'Edmundston (1975)**  
First director: Olive Mercier  
1991 director: Yolande Lepage Cyr

**MONCTON (English) — The Miss A.J. MacMaster School of Nursing (1974)**  
First director: Harriett Hayes  
1991 director: Géréne Gautreau

**MONCTON (French) — École d'enseignement infirmier Providence (1977)**  
First director: Sr. Eléonore Chamberlain  
1991 director: Eléonore Chamberlain

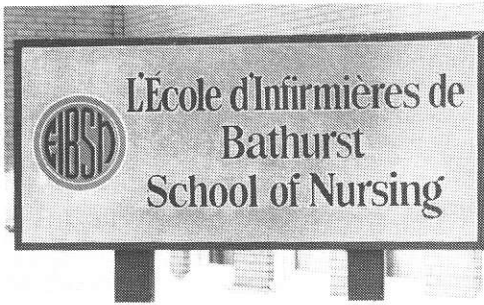




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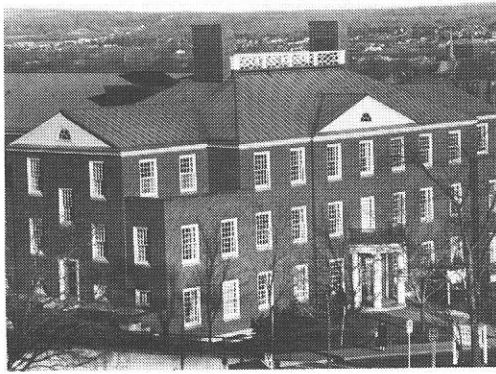
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3



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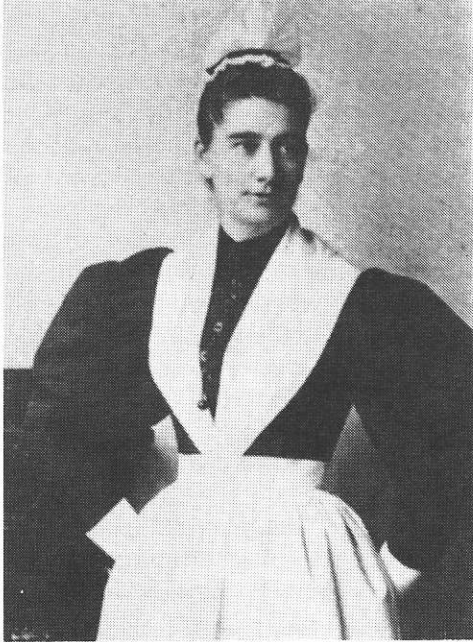


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4

(Clockwise from top left) 1. Saint John School of Nursing; 2. MacMaster School of Nursing; 3. University of Moncton; 4. Providence School of Nursing; 5. Edmundston School of Nursing; 6. Faculty of Nursing, University of New Brunswick; 7. Bathurst School of Nursing.



Eliza Hegan was one of the first graduates of the first training school, the Saint John General School of Nursing, 1890.



Jacqueline Bouchard was the first director of the School of Nursing at the University of Moncton.



Alena Jean MacMaster (far right) discusses the changes in nursing with Katherine Wright (left) and Marion MacLaren, 1975.

### **SAINT JOHN (English) — The Saint John School of Nursing (1970)**

First director: Anne Thorne

1991 director: Susan Logue Burley

Under the *Nurses Act*, the NANB determines who shall practice as nurses. In 1989, there were 126 men practising nursing in the Province, 1.71% of the nursing population. Of these, 115 were staff nurses and eleven were nurse administrators. Society's belief that certain occupations are appropriate for certain sexes has been cited as a barrier to men entering the profession. Despite this gender bias there is ample proof that men as well as women, if they are prepared, offer great benefits to those in need of health care. In 1991, 8,600 nurses were practising in New Brunswick, less than 2% were men.

### **Future nursing education**

In 1982, a resolution from the membership of NANB led to the establishment of a committee to examine the feasibility of changing basic nursing education to an all university system — where the minimum requirement for entry to the profession would be a baccalaureate degree. Two years of intense discussion resulted in the adoption of the *Report of the Task Force on Future Nursing Education*. The decision of the membership did not come easy, but being Visionaries, future planning overcame individual fears and the resolution passed.

The bond between diploma school and university nurse-educators is strengthening. Educators and administrators from the province's nursing schools and faculties are fiercely promoting continuing education for nurses. Future nursing education requires more specialty programs. There are no master's of nursing programs in N.B. The 1989 NANB *Survey of Continuing Education Needs of Nurses* was used as a basis for President Claire LeBlanc's presentation to the Maritime Provinces Higher Education Commission. The Commission agreed to review nurses' needs for graduate programs. Premier Frank McKenna's

vision of the parallel's between health care reform and advanced education for nurses became clear to NANB in May 1991 when he endorsed an all university educational system for nurses by the year 2000. The next challenge for NANB in the growth of nursing education will be filling in the framework for nurse preparation for the 21st Century. Celebrating their excellence and focusing on what they can do, the NANB is there to help nurses keep in touch with the health needs of New Brunswickers — the increasing demand for nurses must be balanced by funding for continuing professional growth. Nursing's frugal reputation must be viewed anew. Money will have to be spent on nurses if the Province is to reap the benefits. At a time when nurses across Canada are insisting on improvement in nursing education, the accomplishments of the NANB must be acknowledged.

Administrative  
and  
Support Services



NBARN staff on the occasion of the launching of the *Golden Anniversary Booklet* published in 1966.



NANB staff photo taken on May 29 after the 1991 annual meeting, which took place in Fredericton.

The business operation and membership services of the Nurses Association began as shared responsibilities among staff. A frugal group, the 1919 motion to engage a secretary was lost but a stenographer was employed to take the minutes at the 1920 annual. Nurse Maude Retallick received \$100 for every three months of service as secretary of the Association in 1927. Muriel Inch and Marg Allen worked as secretaries to the executive secretary (director) but also involved themselves in other day-to-day workings of the operation. Bessie Wightman was welcomed as the Association's first bookkeeper (part-time). Twenty-five year veteran Jean Maston was employed in March 1961 as membership secretary. She worked as receptionist, supplemented the registrar's work and accomplished more. Her organizational skills and outgoing personality became an important component of the NBARN.

By 1962, the Association was boasting an executive secretary (director), registrar, and education consultant, all nurses, plus a senior stenographer, junior stenographer, clerk typist, and bookkeeper. Their task of helping to bring together the image of a caring profession involved a heavy workload. The need for one facilitator to look after support staff was apparent. In March 1980, the NBARN hired Paula Beer as its first administrative officer. Support services eventually became a department unto itself with the general mandate of "holding everything together." Changes in the level of sophistication took place and a clunking old copier was replaced with a state-of-the-art machine and primitive word processors gave way to computer systems. In 1970, the NBARN hired a bilingual secretary. There are now six bilingual support staff in 1991. Stephen Colwell, the current administrative officer, inherited a solid administrative base, bringing a varied business background and new perspective to the Association. Noreen Richard is one of two nursing practice consultants who recently joined the NANB staff. Roxanne Tomilson is the other member of this two-person team.

Dale McLeod became part of the administrative team in August 1970. She learned to cope easily with her broad responsibilities for finances. During her twenty years, the budget more than tripled as the membership increased accordingly by 2% each year. Support staff help each other with deadlines, mailouts and phone messages and they fill in many roles. Monique George is receptionist/filing clerk and secretary to the administrative officer. Doreen French, secretary, assists the registrar. Secretaries to the executive director are Pauline Michaud and Lise Morin. Nancy Demerchant is secretary to the nursing education consultant and the director of corporate affairs.

The telephone voices most often heard when members call the Association are those of Monique George and Dyane Menard, registration secretary, who provides information on the status of a nurse's registration.

Reacting to their own calendar, support staff celebrates December 31st as the last day of registration rather than the end of a year. The 90s brought the feeling that Association staff are closer to the membership who in turn see Provincial Office as their Association and not just some place in Fredericton.

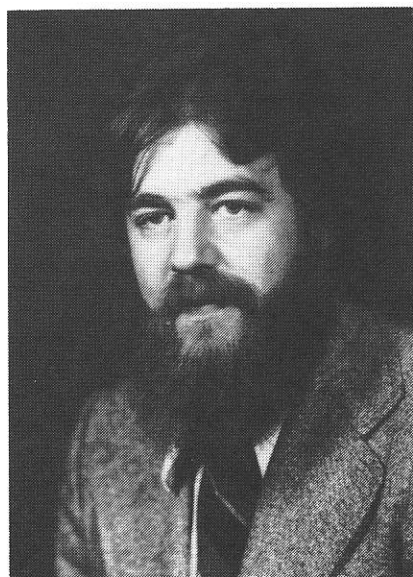
Nurses from every corner of the province attended a gala Open House of the new Association headquarters at 165 Regent St. on May 29, 1991. Members tapped their toes to the sound of a string ensemble. They reminisced with staff in a celebration that was truly shared.

# Communications

# N<sup>n</sup>B<sup>e</sup>A<sup>w</sup>R<sup>s</sup>N



Nancy Rideout, pioneer in communications at NBARN.



George Bergeron

# INFO NURSING



Initially, the Association focused on keeping in touch with its members. While the spirit of nursing is constant, the image of nursing, however, is ever in transition. To accommodate society's needs, the NANB's task is now twofold: to communicate an accurate picture of nursing to the public and to keep its nurses informed.

The matter of keeping nurses enlightened in the early 1900's was a formidable task. The Association relied on letter writing which was frequently referred to as a "communication." The reading of the "communications" took up a large portion of each meeting, not to mention the hours spent writing replies, blotting ink and licking stamps. In 1918, post cards were mailed to each member, notifying them of their annual fee. Mailing tubes were purchased to carry certificates to the "paid up members." Problems arose when dues, that had been mailed, were not received. On occasion, letters were written by nurses' lawyers trying to convince the Association that a particular nurse was in "good standing."

Notices of meetings were placed in the *Saint John Times*, *Saint John Globe* and *Moncton Transcript*, and so forth. Telegrams were used to make the Association's position known to governments. The Telegraph Publishing Company's costs were at a rate of \$.25 a line. Newspapers advertised the uniformity of nurses fees. For example: *In 1917, a duty nurse made \$18/week (including the benefit of eight hours sleep every 24 hours). Quarantine cases paid \$21/week; alcoholic, insane or tuberculosis patients, \$3/day; small pox cases \$5/day and obstetrics paid \$18 a week.*

The *Canadian Nurse Journal* became a source for communication with other nurses. In 1917, the 134 members of the NBAGN sent 25 cents per member to contribute to the editor's salary. One of the early Journals contained the names of the first slate of officers of the Association. New Brunswick nurses provided a page of public health news for each edition. A history called "New Brunswick Association of Registered Nurses" was published in *The Journal* in 1928

and was written by nurses Gertrude Williams Jones and Emma Mitchell. Later, other nurses became regular contributors. In 1948, the Association recommended that "the French Page" in *The Journal* be continued. In 1949, a subscription to the *Canadian Nurses Journal* was included with the membership fees.

The Association's early affiliation with the Local Council of Women provided another avenue for networking. In 1935, two nurse delegates were the first to attend a meeting of the New Brunswick Hospital Association. The NBARN spread its doctrine, relying on meetings to update the membership until the birth of the chapters. The faithful participants of the province's eleven chapters formed the solid foundation of the Association. These groups became the open line between members and their representatives. Their communication generated local interest, laid the groundwork for the annuals, kept the members informed and provided educational programs and fund raising. Lines were established with government departments. In November 1958, one year before New Brunswick Hospital Insurance came into effect, Doris Grieve, chairperson of NBARN's nursing service committee, was employed as nurse consultant to the Department of Health. The Association continued to establish links with community agencies and government departments, but not always smoothly. In 1962, the executive secretary recorded that ... *once again a request was made, this time to the Minister of Health, for representation on the Advisory Committee on Health Services. A summary of his one-page reply is "NO."* Ten years later, Myrna Sherrard was named to represent the NBARN on the New Brunswick Health Services Advisory Council. By 1979, communication links were formalized with other health-related groups. During the last decade, the NANB had representation and strong alliances on many outside organizations. Nurses on the present day nursing resources advisory committee report directly to the Minister. Individual nurse members give hours of voluntary services to health-related

organizations in the province. In 1991, legislation made it possible for nurses to sit on hospital boards. The expertise of some New Brunswick nurses has been recognized by their appointment to bodies like the Status of Women and the Alcohol and Drug Dependency Commissions. Most recently, past president Carroll Ann O'Leary was appointed to the Premier's Council on Health Strategy.

Good communication is essential to the growth and development of the NANB. The explosion of information in this generation makes the Association aware of the membership's need to keep current. Nurses are expected to communicate effectively with their patients, their co-workers, the public and one another. A large part of their service involves health education. As consumer advocates, nurses are conscious of their need to balance diplomatic language with accurate information. Keeping nurses informed has therefore become a prime concern of the NANB. In 1989, 27 of the 175 dollar practising fee, was spent on communications.

Today, the public is made aware of the Association via its spokespersons, and in news releases sent to the media. Video tape recording equipment is put to many uses for public exhibits, chapters and by individual members. The Association's staff is accessible daily to answer questions and provide counsel to each nurse through a 1-800 telephone number. Nurse consultants travel the province, assisting the members. Publications are prepared regularly on standards as guidelines for nursing practice and education. The NANB also relies on its magazine, *Info nursing* to be the connecting tissue that links provincial office to the membership. It is the chief vehicle for educating, informing, reminding and sharing with members.

In the initial stages of the Association, names of approved members were published in the local papers and the Royal Gazette. It wasn't until 1945 that the Association employed a secretary, in the person of Miss E. Rayworth. Muriel Inch provided secretarial skills for a number of years.

Staff working together stencilled newsletters on a gestetner and multigraphed copies, circulating them to each member three times annually. Bulletins were sent monthly to each chapter. The Association's first typewriter was rented. In 1933, the eleven-year-old rental was replaced by a \$50 machine with a modern keyboard. This was funded by the Chapters.

Lorna Smith joined the support staff as a summer replacement in 1960. She stayed for fourteen years. Describing herself as a part-time employee doing a full-time job, her experiences with the \$5,982 "addressograph machine," purchased in 1973, are recalled with wit and humour. Agile skills, and a strong back, were required as well as the use of both hands, one to turn the wheel and one to keep the ink flowing. Typing briefs in French on an English mechanical typewriter was a constant challenge.

An advisory committee on public relations was set up in one provincial centre in 1948. In 1952, a speaker's kit was developed and printed for use by chapter nurses when recruiting nursing students. Ten years later, the first news bulletins, containing reports approved at the annual, were printed on a new electric typewriter and distributed to the Association's 3,512 members. Plans began in 1962 to publish a booklet about the NBARN, for its fiftieth anniversary. This resulted in *The Golden Years*.

The news bulletins were issued in French and English in November 1970. Fernand Richard provided translation expertise to the NBARN for years; the present professional translators are Patrick Tardif, Euclide Daigle, McLaughlin Translation and Caroline Goguen, the current in-house translator. The newsletter of May 1971 brought annual reports to the members prior to their yearly meeting. This was also the first year that four news bulletins were published. One, a red-coloured emergency-bulletin, alerted members that their future was challenged by the Government *Report of the Study Committee on Nursing Education*. This document proposed changes in their legislation that would relinquish control of nurses' registration and education to Government. Nurses responded to

the alert and maintained their rights under their *Act*.

Katherine MacLaggan's name first appeared in the Association's records in 1946 in her report of the "Committee of the Newsletter." As president, in June 1963, she asked the Association to establish a new position in the form of a public relations officer. Marilyn Brewer met the criteria (hand written by Lois O. Smith in the 1964 minutes) and qualified as the NBARN's first public relations officer. Nancy Rideout became a liaison officer in 1968 and remained in that role until 1977. Professional in every aspect, these two nurses came forward over the years to serve the Association in many different and important capacities. They learned how to respond to government briefs on short notice and literally and figuratively wore many hats — Gloves and hats were once a required part of a nurse's attire when she spoke from the podium.

Any departure from protocol was shunned by the Association and at first information passed to the press was rigidly screened. This was in dramatic contrast to 1968, when President Katherine Wright's address "The Need for Change," was printed publically and in its entirety. In 1971 the annual meeting opened its doors to the news media, simultaneous translation was provided and annual reports were mailed to all members.

George Bergeron came to the NBARN in 1977 from Sherbrooke, Quebec, bringing a range of editorial and journalistic skills to assist him as liaison/public relations/communications officer. The vehicle used to keep the Association's finger on the pulse of its nurses took form in August 1974. The first tabloid-size issue, twelve pages of newsprint, was called the *NBARN News*. In 1975 the Fredericton Chapter of the NBARN named the paper *Info*, winning a contest over ninety-nine nurse hopefuls. The little paper lived up to its name. Its important role was predicted by President Anne Thorne at the 64th annual meeting: ... within the pages of our communication tool lie the history of our past years and the promise of future efforts. In 1978, a three-year public relations program was

initiated. The following year, the Association allocated one page of its news bulletin to the Nurses Union; "Hotline" kept members informed on socio-economic matters. Keeping up with technology, the entire issue of *Info* was typed on a word processor in May 1986. The last tabloid issue was distributed in 1988.

Bound and secured, the NANB's communiques are stored like report cards. Reflecting the Association they represent, these communication tools have made the grade. In 1991, *Info nursing* is a sophisticated document, printed in colour and on high-quality paper. Its professionalism is evident in carefully-researched articles that offer nurses direction in nursing education and practice issues. The NANB staff members, Practice Consultants Pam Armitage and Noreen Richard and former Education Consultant Nora Hammell, who is presently on the staff of CNA, provided valuable clinical consults via *Info nursing*.

*Info nursing* has become the voice of the members. A 1983 survey showed that it was read by 74% of nurses. In 1989, *Info nursing* carried a profound communication from Lucille Auffrey, executive director: *The source of an organization's strength, she wrote, is the vision that it holds of the future.*

## Library

The Nurses Association of New Brunswick recognizes that nurses are in constant need of ways to keep current. Access to scientific data and recent literature is essential in their nursing practice. A great many health-related books are required for use by nurses in their role as health educators. Nurse-writers and researchers are increasing, keeping up with the changing scene. Early in its history, before the Society became an Association, nurses had the insight to see the value of a library of nursing and health literature. The lack of storage space contributed to the difficulties of keeping a permanent collection of materials.

The NANB library was formally established in 1959 when reference books at provincial office were made available to members through affiliation with Central Library Services. Staff, nurse-members, and nursing students used the library facilities that were located originally on the third floor, and later in the basement of 231 Saunders Street. Nurses had access to the collection of approximately 900 books, 35 journal titles, vertical files, materials from a variety of health educational agencies, audio visual aids and other reference sources.

In 1973, Margaret L. Parkin (CNA librarian) completed a survey that made suggestions for future library resources. Judy Heron came to the NBARN as part-time librarian in 1973. In 1977, Mary Russell, committee co-ordinator for NBARN, prepared an update of library services. Statistics on nurse-users compiled since 1978 demonstrate the need for services; the Canadian Library Association *Policies and Procedures* assisted the NBARN to establish a library, but lack of regular staff deterred the organization of a full-blown system.

In May 1981, Barbara Thompson accepted the position of library-assistant and took on the challenge of developing a library that could operate to its full potential. Set up in the basement at 231 Saunders, she promoted library services and became involved in related library matters on a local and wider scale. In 1983, the

NANB moved into the video age and tapes became available on loan. In 1984, a Federal assistance grant allowed NANB to employ two summer students to help with library services. By 1985, the position of library assistant was reclassified to librarian. NANB's current librarian works part time to provide services to association members, staff and nursing students by the selection and organization of books, journals, reports, audio visual and non-print materials. The nurses' practice has become more sophisticated, with their educational advancement, making the librarian an important player in their efforts to provide high-quality patient care.

The new library at 165 Regent St. is adjacent to the archives, a room set aside for the identification and preservation of nursing history in the province.

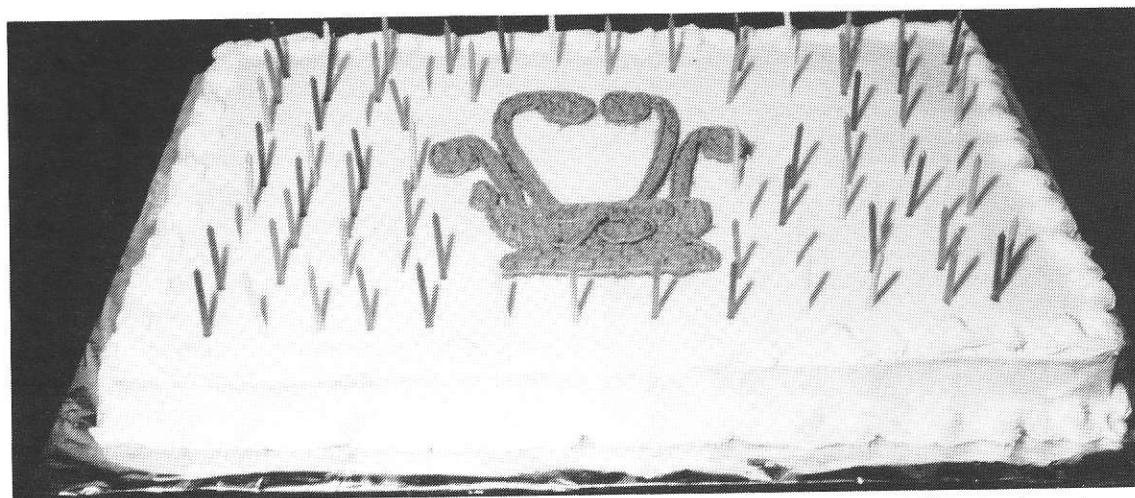


Barbara Thompson, NANB librarian, looks over a reference book with Pam Armitage, NANB director of corporate affairs.

# The Vision



**LOBBY CAMPAIGN** — President Claire LeBlanc; Anne Marie Atkinson, Director of Corporate Affairs, and Lucille Auffrey, Executive Director, met with Premier Frank McKenna and Minister of Health and Community Services Raymond Frenette last spring as part of a lobby effort to get a commitment from Government to support the BN as the educational requirement for nurses in the future. The lobby effort conducted by nurses on a province-wide basis was so successful that the Premier, during the 1991 annual meeting, pledged his support for the new requirement (Photo taken April 1991, hence the titles).



The 1991 annual meeting provided an opportunity for nurses to celebrate. Shown above is the 75 Anniversary Birthday Cake that members shared at the Lord Beaverbrook Hotel May 28, 1991.

The world and the forces that mould public opinion have changed radically since the days of Florence Nightingale but history is clear that technological dominance, global challenges, faltering economies and fragile lifestyles have not altered the caring dimension of nursing. Nurses maintain that scientific advancements and modern facilities will not make people healthier if they are not "cared for" and "cared about." By recognizing their historical attachment to self-sacrifice, nurses can learn to balance their caring and their rights. The performance of the NANB has helped nurses put obligation and caring, Miss Nightingale's version of nursing, into focus.

Nurses in New Brunswick work in a variety of settings where they are expected to be, and do, many things. Their leadership qualities are ever apparent. Fortified with the legacy of their predecessors and their expanding education, they are preparing for changing trends. But nursing is also a feeling. The essence of New Brunswick nursing lies in its spirit and its vision. The nurses' deep sense of community and collective purpose, through their Association, remains at the heart of their quality of service. Nurses may see nursing differently but when they discuss their craft, they speak the same language with a clear idea of what nursing is about. They are learning to set differences aside and to stand together as caregivers forming a common front. Voices that are concerned express the desire to continue their pioneer tradition of incorporating primary health care in all of their efforts. Voices that are certain maintain that they will not compromise human caring. Grounding their ideas in the realities of the world their aim is holistic and humanistic treatment for everyone. Acknowledgement of nursing's history has taught nurses the lesson that they have to take care of themselves if they are to provide good care to others. Nurses now know that they must change their world if they are to make their lives better.

This history of the Association is a celebration of the present in the belief that to understand

nursing today, there is a need to be familiar with its heritage. Reflections on the history of the nurses of New Brunswick reveal both change and continuity — change in professional growth and continuity in the enduring essence of nursing. Thankfully, the image of the caring nurse has endured; the old romantic notions and stereotypes are fading. Listening to its membership for seventy-five years, the NANB has set its sights on a specific direction — one vision that allows its nurses to live up to their nursing potential. May the future continue to bless this Association with strong, determined and united Visionaries.

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- Communications with directors of nursing schools and other sources including: Rev. Sr. Corinne LaPlante, historian of nursing, Bathurst; Lorraine Bourque, director of public health nursing, Province of New Brunswick; and Marg Allen, executive secretary, Red Cross Society, New Brunswick.

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NEW BRUNSWICK PROVINCE

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