

A HEALTH AND RECREATION PROGRAM  
FOR STUDENT NURSES

A THESIS

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A HEALTH AND RECREATION PROGRAM  
FOR STUDENT NURSES

I. An Introduction in Which is Brought Forth the Need  
for Such a Program in Schools of Nursing.

Schools of nursing have been constructive and progressive in concerning themselves with the problems of professional education and the attainment of professional efficiency, but they have been little concerned with the problems of health and social education for their students and the attainment of a richer life. If any education fails to train for physical well-being, for leisure, for culture, and for creative expression, then it has failed miserably.

First, let us consider the question of health. What is health? As someone has so well put it, "Health is that quality which fits us to serve best and live most.". Nurses certainly are taught to serve best, but do they know how to live most?

Studies that have been made indicate that the health of the average student nurse in training does not improve. Actually, it is often the exception rather than the rule to find a student nurse graduating with better health than she had at the time she entered the school.<sup>1</sup> This lack of health among

student nurses exists because the importance of their health has not been stressed enough, and because they have not been taught the means by which optimum health may be achieved and maintained.

During the past twenty years we have heard with increasing frequency such terms as "preventive medicine", "public health", "mental hygiene", and many others which indicate that the welfare and health of the group is becoming the concern of everybody in the community, and especially of the medical and nursing professions. The attitude of the hospitals in the past was such that they concerned themselves only with the remedial treatment of disease, rather than with the idea of prevention and instruction for health promotion. This was especially true of schools of nursing, in their regard to their own students. Since the schools of nursing are producing some of the most important health workers for the community, a responsibility for health education is laid upon the schools.

By this I mean a responsibility for education to help the student acquire knowledge essential to health, to give the opportunity to develop certain habits that will promote bodily function, and to develop proper mental attitudes toward themselves, their work, and their environment.

Good physical and emotional health not only render the individual fit to "live most", but also serve to increase im-



mensely the effectiveness of her approach to the patient, especially in her teaching of health practices, and thereby fits her accordingly to "serve best".

Now let us consider the matter of recreation. What is recreation? Any program of recreation should be so designed as to arouse interests and latent talents and training in skills so that one can develop a hobby, avocation, or continue to pursue knowledge of interests so that one can use one's extra hours. In other words, then, recreation is the use of leisure time.

The profitable use of leisure requires a philosophy of life as well as the development of skills. We need expressive activities carried on solely for the love and joy derived from them. We need action that is outgoing and generous, in which we can be self-forgetful, not acquisitive. We need to realize the delight of beauty, craftsmanship, friendliness, and good humor; the joys of free physical activity, and of being on friendly terms with mountains, fields, sea and sky, and the birds and animals.

Such activities add to the richness of life, and afford release from the tensions of routine and coercive tasks which the social order imposes upon us, especially as nurses.

George A. Lundberg maintains that a desirable leisure pursuit must fulfill four requirements:

(1) it must have the capacity for being relatively permanently interesting;

(2) it must be as different as possible from the activities which our station in life forces upon us;

(3) it should as far as possible have both its origin and its fulfillment in the individual himself; and

(4) it should be at least compatible with, if not conducive to, physical and mental health and personality development.

When the nurse enters the community after her years of training, she should be so educated as to fit well into the life of the community. With the increased amount of leisure time that we have today, the problem of recreation has been pushed more than ever to the front. Community centers, civic organizations, business associations, and other groups organized for serious purposes are giving greater prominence to recreational features. Recreation has become a vital part of human living, and the nurse must build up within herself resources which will better enable her to meet the social obligations of the community in which she lives.

Health and recreation go hand in hand, for recreation promotes health, and in turn we cannot enjoy any form of recreation without health.

## II. How a Public Health Trained Nurse Would Fit into This Program.

Although the need for such a program of health and recreation for student nurses, as outlined in the preceding paragraphs, is easy to see, it necessitates thinking and planning in order that it may be carried out successfully. It is becoming increasingly more generally recognized that this is one of the great responsibilities of the school of nursing. I believe that the key to the situation lies in delegating to some one person who has the requisite health standards the maintenance of the health of the student nurses and the stimulation of their recreational interests. Who would be better prepared for such a task than a public health nurse?

A public health nurse is trained to be a teacher of health. She has learned to recognize good health as well as the early symptoms of ill health. She knows the principles of physical and emotional health and how to apply them. She is, therefore, well qualified to carry out a health teaching program.

A public health nurse is trained to consider the people under her care as individuals, and she will look upon her students as such in her attempt to guide them toward a more healthful and enjoyable life. The public health nurse, because of the very nature of her work, has had, more than a nurse in

any of the various other fields, to cultivate qualities of adjustment and variety in her methods of approach to people, qualities which would be very helpful in dealing with students who vary greatly as to personality and interests.

The person in charge of this program must not only be able to win the confidence of the students, but able also to discover their interests and be able to arouse them to action. This is what a public health nurse has learned to do when she carried on her program of public health in the community or county. In other words, she is trained as a leader.

A public health nurse knows how to obtain the cooperation of community resources, and could thereby help to furnish a recreational program for her students, for many schools do not as yet have such facilities. Almost every community has swimming facilities, tennis courts, horse-back riding facilities, various hobby clubs, and many other recreational facilities which could be made conveniently available for the student nurses.

One of the most valuable contributions that a public health nurse could make in this field is that of giving her students a public health viewpoint upon which the new curriculum is based. By stressing from the beginning the students' own health and the means through which optimum health may be achieved and maintained, the student will develop the same



attitudes toward her patients as she uses for herself.

The supervision of sanitation facilities, rest, diet, personal hygiene habits as a prevention of disease, all are second nature to the public health nurse, and it is just such supervision that student nurses need.

A health service for the students does not only mean examination, treatment and care, but must include a complete follow-through program. This is again a place where the public health nurse fits in remarkably well.

Students need to have contact with people outside of their hospital life and professional associates. Since the public health nurse has had to act as buffer and meeting-ground between the professional and lay people, she would be able to do the same for her students, for her position is most separated from the hospital routine and she fosters a wider outlook.

Our program must include health instruction, health supervision, and health service, as well as recreational opportunities. It is a huge job for any one individual to handle, but I believe that a public health nurse is probably better trained and better equipped for this purpose than is anyone else.

### III. The Chief Causes of Ill Health Among Student Nurses.

Let us look a little deeper into the need of the health and recreation program by surveying some of the chief causes of ill health among student nurses. This will show us that our program must be one of prevention and protection, and it will give us our clues as to organization as well as our underlying principles upon which to build our program.

Why should studies show that the rate and severity of illness among student nurses at the University of Minnesota, for example, is distinctly greater than among other university girls living under comparable conditions? A study made by Miss K. Densford indicated that the amount of illness among student nurses increases with each year of training.

First among causes we find acute respiratory infections (including pneumonia and tonsillitis). Is this due to lack of techniques taught by the hospital and actually adopted, which would safeguard the nurse from infection? All too frequently it is assumed that student nurses know much more than they really do about protecting themselves against infection. Also at times they are not informed about the nature of the illnesses or dangers of exposure to individual patients under their care. The answer to this problem seems to me to be in a program of teaching prevention of illness, which can be put to a practical use.

Another factor which is responsible in part for the excessively high morbidity rates among the student nurses is the element of fatigue. Fatigue, of course, lowers resistance and makes for indifference or carelessness in technical procedures. Shorter hours, sufficient vacation periods, working assignments which take into consideration the student nurses' status of health, and greater opportunities for rest and recreation might be some of the ways by which to cope with this problem.

Weak feet, strained backs, and aching muscles, because of poor posture and incorrect use of their muscles, cause much trouble to student nurses. This shows us that posture exercises, foot exercises, and corrective exercises could play an important role in our program. Our physical education program, if it is to suit our needs, must take into consideration these factors and adapt itself accordingly.

Improper diet has also lead to various serious consequences. The undernourished need careful supervision of their diet in order to build up; the overweight are also working under a handicap, which diet supervision would certainly help to correct. The coffee habit becomes very marked among nurses. Hurried eating, the swallowing down of food without sufficient mastication, or the complete omission of a meal because the time saved seems more desirable for some other activity, are

all habits common in the student nurse's life, and which seriously affect their health. Education as well as interested supervision is needed here.

Fatigue is not the only factor which lowers their resistance to disease and makes for general poor health, but here also the lack of sunshine and outdoor recreation play a large role. What the student needs is opportunity as well as stimulation toward activities which will take them out-of-doors.

Students do not only suffer from physical ill-health, but mental ill-health as well. Often it is a matter of adjustment to hospital life. Frequently it is too close confinement to the hospital. Their life is too narrow. The students need to be drawn away from the hospital and contact other people in order to broaden their horizons.



#### IV. What a Health Program Should Include.

The essentials of an adequate health program are a health service, health supervision, and health instruction.

The health service begins with a thorough entrance physical examination, which should be required, and carried out by competent physicians. An annual examination should be made thereafter, with constant follow-up corrective work where needed.

An appraisal of our body mechanism at regular intervals would seem as reasonable as an appraisal of the mechanism of our automobile before setting out on a trip.

The primary purpose of a health examination is not the diagnosis of disease, but rather the detection of defects, incipient disease or predisposition to disease, as well as the faults in living habits, the correction of which will promote health and lengthen life. The value of a periodic health examination will, of course, depend upon the thoroughness with which it is carried out. When skillfully and painstakingly employed, it can become a most effective tool for the promotion of personal hygiene and preventive medicine.

Immunization against smallpox, typhoid fever and diphtheria, and possibly scarlet fever if a Dick test proves positive, should be required of all students upon entrance. The

tuberculin test should be a part of the entrance examination and done every six months thereafter, and if positive at any time, an X-ray examination should follow immediately. The students should be weighed at intervals of one month. The health service should also include hospital care for all students needing such care, and necessary remedial work should be done by a competent physician.

In the health service we must include mental as well as physical health, for we want our nurses to have sound minds in sound bodies. There must be some person who is capable of helping the students to make fitting and proper adjustments in difficult circumstances.

Such a health service would not, however, be complete without good health supervision.

A monthly health index of each student should be computed. The students must be closely watched for any symptoms of ill-health, and early placed under expert care. The health supervisor should keep the weight charts, recording marked deviations, and her responsibility should include the building up of the undernourished as well as reducing of the overweight under the direction of a physician. Supervision of menstruation of the nurses in order to detect changes in rhythm or amount is also very essential. The student's health status must also be taken into consideration when making the

assignments for training work. For example, a nurse with poor nutrition, or who for some reason is rapidly losing weight, is not an ideal candidate for night duty or tuberculosis work.

Among her other duties, the health supervisor should include an occasional check-up of the student's general diet, especially in regard to such items as milk, vegetables and fruit.

The health supervisor should make a healthful environment for her students, which will make the formation and practice of good health habits an easy and natural task. Good habits of rest, diet, exercise, and personal hygiene must become a part of every nurse's life.

As her chief interest, the health supervisor has in mind the health and happiness of each student, and the students should feel, therefore, free to come to her at any time for advice and help in solving their many personal problems. She should also plan to have individual conferences with all students at frequent intervals, for the purpose of talking over the student's health status, health problems, marked improvements, and future plans.

Health instruction is best carried out by means of conferences with the health supervisor as the leader. The aims of such health instruction should be three-fold:

- (1) To know the importance of good health, so that by forming good health habits they may function professionally;
- (2) To understand the relation of hygiene to the prevention of disease and the promotion of health; and
- (3) To learn to recognize their opportunities as nurses to teach health and health habits.

Just what the subject of these health conferences in group instruction should be depends upon the interests of the students and the health problems confronting them. For the chief purpose of these conferences is to improve the health of the students. Fundamental topics upon which the discussions might be based, and from which to branch out to the health aspects most vital to these girls, could include the following suggested group:

- (1) Health habit formation.
- (2) Hygiene of the muscular system, including posture, feet, shoes, play and exercise.
- (3) Nutrition, including mouth, teeth, food, food habits, and digestion.
- (4) Hygiene of the excretory system, including proper function and care of kidneys, skin, and lungs.
- (5) Hygiene of the respiratory system, including voice,



prevention of respiratory infections, relation of posture, and ventilation.

(6) Hygiene of the circulatory system, including the importance of regular health examination, moderation in all things, especially smoking and alcoholic beverages, and relation to exercise.

(7) Social hygiene, including marriage, parenthood, venereal diseases, and review of the anatomy and physiology of the reproductive system.

(8) Mental hygiene for the nurse and for the patient.

(9) Aspects of clothing.

(10) The nurse as a teacher of hygiene and health principles.

The success of such a course lies in the way in which it is presented. The interest of the student nurses in their own health must be aroused. If the nurses are only interested in passing an examination and getting a good grade in this course, they will obtain only a very little theoretical knowledge. But what we want to give them is practical working knowledge which they will want to apply and make use of because they not only realize, but are convinced of, the personal benefit they will derive from such action. Only when they have reached this stage of their development can they



## V. What a Recreational Program Should Include.

Student nurses are normal persons when they come into training. Their interests are many, and no doubt throughout their previous lives they have had opportunity to express themselves satisfactorily in the things in which they were interested. In the school of nursing, the confining hours, the uncertainty of time off duty, as well as the general lack of free time, make it almost imperative for them to drop out of many of their former activities. Life becomes a routine of work, study, eat and sleep, which alone without other interests lead to a very narrow outlook on life to say the least. Under the tenure of this routine life recreational and diverting activities become all the more essential for a balanced scheme of living. Recreation must have its rightful place somewhere in the student nurses' program.

In organizing and setting up a recreational program for a school of nursing, such problems as time, space, equipment, and supervision are to be coped with. But before even these are considered, we must settle upon the activities which are to be included. These will of course be limited to a certain extent by circumstances and the availability of facilities, but the activities must in any case cover the interests of the group, as well as be those from which the student nurses

will derive the most health and social values.

The aims of our recreational program for the student nurse include the following:

1. To meet the needs of the off-duty students, and to create an outlet for the emotions.
2. To socialize many who are or would otherwise be unsocialized.
3. To correlate with nursing, activities that will aid the student in her chosen work.
4. To give a cultural knowledge of activities that are vitally necessary for a happy, well-rounded, normal life.
5. To give the student opportunity to enjoy and receive the benefits from fresh air and sunshine and outdoor activity.

I believe that every school of nursing has recognized the value as well as the need for some kind of social activity for its students and has made arrangements for such a program. We find such socializing activities as the "Pal" or "Big Sister" system between the old and new students. Get-togethers, or "mixers", with games, stunts and refreshments as drawing-cards, are very popular. Teas, dances both formal and informal, and special entertainments on holidays such as New Year's Day, Christmas, and Halloween are often the highlights of the students' social life.

Such activities certainly serve as an outlet for the



students' emotions, take them away from their professional life for a few hours, help to socialize many who have not as yet become so, and give them a cultural education that every young woman needs. But these activities do not alone make a well-rounded recreational program, for they fail to meet certain of the students' most vital needs from a physical health standpoint. Sunshine, fresh air, outdoor activity, as well as indoor activity of the kind that will do away with physical and mental weariness, must be among the first considerations.

George W. Braden, of the National Recreation Association, during the 1935 Annual Meeting of the National Education Association listed the following ten major types of leisure-time activity.

1. Nature Contact and Nature Crafts (including nature lore, camping, hiking, collections, museums, and gardening)
2. Social Recreation (all forms of recreation depending for their value primarily upon human contacts).
3. Physical Activities ( the culture of the body as a fine art - the Greek emphasis; physical education as equipment for fine and abundant living rather than as a preparation for sports and pastimes which are an end in themselves). Human nature being what it is, even competitive sport for its own sake has recreative value, although

it also carries real danger of overemphasis.

4. Re-creative Music (music for the joy of self-expression, including bands, orchestras, chorals, glee clubs, etc.).

5. Re-creative Drama ( including pageants, pantomines, tableaux, puppetry, as well as plays).

6. Rythmics (social, folk, and other types of dancing).

7. Re-creative Arts of line, color, form, and perspective (painting, sculpture, plastics, photography).

8. Handicraft Arts (work in wood, metal, textiles, leather, etc.).

9. Scientific Experimentation Hobbies (astronomical, biological, geological, chemical, aeronautical, electrical, radiological, etc.). Hobbies of collecting might be included here.

10. Linguistic Arts (forums, literary composition, and recreational readings).

This list of leisure-time activities might well serve as a guide in making our recreational program.

A person's leisure time is her own. We should not wish to dictate to the students concerning the use of it. We can, however, give our students tools and guides with which to shape their leisure program wisely, both in school and later.

Physical Education is one of the means through which we can give them these tools. The physical education program is so very definitely related to physical health that there must be the closest of cooperation with the health service in considering the activities to be carried on by the individual students or groups of students. The physical education program must offer stimuli to wholesome, regular, moderate exercise which is often neglected or overdone if left entirely to the initiative of the student.

The following is a discussion of suggested activities which meet the needs of student nurses.

Swimming is one of the ideal activities for nurses, particularly because in this sport the weight of the body is taken off of the tired feet. Furthermore, swimming involves practically all of the muscles of the body. With the weight of the body taken off the muscles of the legs and feet, these can be strengthened without undue fatigue.

A grand game is tennis, for it meets practically all the requirements for a sport to be pursued throughout adult life. It requires but few participants, is widely available, can be considerably modified as to severity of effort, and need not require much time. Nurses, however, should play recreative tennis, and not competitive tennis. The latter requires too much physical exertion and nervous tension.





but an almost too strenuous game for nurses. The games should be short and unless the girls play regularly and frequently so that their muscles become used to the exercise it becomes physically too tiring.

Bicycling is a very stimulating and all around exercising sport. It is another opportunity for getting the student's weight off her feet, and yet giving the leg and foot muscles a good chance to strengthen.

Horseback riding as an activity for nurses falls into the class with bicycling, though it may be somewhat more restful and relaxing.

Let us not overlook the great European art of walking and hiking. Of course, it is not for overfatigued students, but it certainly adds to the enjoyment of life. Though it may fatigue the muscles, it relaxes the mind. We all need the opportunity to come into close contact with the beauties of nature, It is on top of a hill, in the shadows of the woods, along the shore of a lake, by the side of a babbling brook, or on the quiet wayside path in the peacefulness of the country that we can rest our nerves, dream our dreams, and imbibe new strength of which our modern civilization so strenuously saps us.

Walking and hiking, when done in organized groups, also afford opportunity for developing and carrying on

hobby clubs such as nature study, collecting, photography, and singing.

Skating and skiing reign during the winter months, and would be good forms of recreation for the nurses. It would get them out into the fresh air during those winter months, exercise their lungs, build up their hemoglobin, and thereby give them a stronger resistance against those too frequent colds. It also gets them away from their hospital walls within which they are likely otherwise to hibernate until the warmer spring sun tempts them to come out.

All of these more or less strenuous forms of exercise must be properly scheduled and supervised or they may do more harm than good. There is experimental evidence to prove that those who exercise moderately and consistently develop a greater reserve than those who do too much. There should be classwork to accompany the outdoor sports, and the students should be encouraged to participate in their independent activities.

Since most of the students are normal individuals from the standpoint of physical health, the larger part of the program can consist of these activities discussed, in which we find that physically normal people indulge. However, modified exercises for the physically handicapped or underdeveloped should also be provided and required.

Modification usually means change, reduction, or increase of activity or provision for relaxation and rest. The most common defects for which students seek the aid of physical education are poor posture, weak feet, and flabby muscles. The three most outstanding causative factors for these defects are: the type of work the nurses are called upon to do, improper clothing, and physical weariness. There should, therefore, be posture classes, body mechanics, or what ever you choose to call it. A corrective program in which the students' interests have really been aroused so that they will fully cooperate can be very effective in preventing as well as overcoming these defects.

Our program of physical education must also include resting periods. There should be opportunity for relaxed basking in the sun during the warm months. And all year round the students should be required to spend at least half an hour out of doors each day.

Besides these physical activities, there are social activities which should not be neglected. Dramatic clubs, glee clubs, journalism clubs, and various hobby clubs, offer excellent opportunities for expression which gives the student nurse satisfaction, confidence, stimulation, as well as broadening her outlook and interests.

Finally, let us not forget dancing. Whether natural,





## VI. How to Correlate Such a Program with the Curriculum of the Student Nurses' Course.

This, I realize, is where the Nursing schools face their greatest problem. Though we may have decided upon the Public Health Nurse as best suited for the work of health and recreation supervisor, and we may have definitely in mind what the health and recreation activities of our ideal program should be, there is yet the question of equipment and time to be solved.

The equipment does not necessarily have to be large and expensive, for most training schools are so located as to be able to make use of many community resources. Such organizations as the Y. M. C. A. and the Y. W. C. A., Neighborhood Centers, and Athletic Clubs usually have swimming pools, the use of which could be made available to the school at very reasonable rates. If the school should also be without an auditorium, gymnasium, or other large floor space, these same organizations could help out in this respect also. Community playgrounds with ball fields, tennis courts, etc., would certainly cooperate in obtaining definite hours for their use by the nurses. Special rates can also be obtained from riding academies, especially if there is a rather large group interested.

The student nurses would be much benefitted by the use of such community resources, being drawn away from their hospital surroundings and finding also opportunities for making contacts outside their professional circle.

Such equipment as baseballs and bats, volleyball and net, basketballs, and ping-pong sets should and can be very easily furnished by the training school. Golf sets, tennis racquets, ski equipment, etc. must be the personal property of the student or rented by the individual upon occasion. The girls should be urged at the time of their entrance to bring any recreational equipment of this sort which they may have.

Time has such a definite meaning and value to the student nurse that she treasures every free minute that she has. Her eight hour schedule is heavy and means much work, but we must realize that a health and recreational program is an essential part of any curriculum, and should, therefore, be allotted its rightful place.

The health conferences should be included in the regular schedule of courses given the first quarter. Individual health conferences should be also definitely arranged for at least once in every three months.

The recreational activities should be so scheduled that there are a variety to choose from everyday, both in

the mornings and afternoons, and these should be on a basis of voluntary participation. However, the formal class activities such as corrective exercises, swimming instruction, and instruction in various other sports and dancing, should be included in the regular class schedule one or two hours every week. Perhaps it would be found most convenient to use one or two evenings a week for sport classes, and other social activities such as glee clubs, dramatics, hobby clubs and dancing. But we should avoid using too many of the student's evenings in this way,

Since the health and recreational supervisor could not reasonable be expected to participate in all of the activities, students who have had previous training or experience in the various fields can be appointed assistant directors in charge of particular activities. This would be a good form of training in leadership for these students. This procedure would, of course, be of even more value when applied to those students who have achieved proficiency in one field of activity while in training rather than through previous education, thus adding an incentive for interest in the recreational program.

Also, the various community clubs and organizations whose cooperation has been obtained can provide instructors for some of the activities. For example, a red cross in-

structor might be found available for swimming and life-saving classes; a basketball coach could be obtained with the help of the Y. W. C. A.; the playground director in the summer may be able to furnish an hour's instruction a week in baseball, volleyball, tennis, etc.

For participation in such a program, the students should receive University credit for physical education for the classes in which they register, as well as rewarded by special recognition at the end of the year for taking active part in the recreational opportunities offered, and by appointment as assistant instructors.

Just how effective and workable such a program as I have tried to outline would be, I do not know. I do believe, however, that the student nurse of today should be given every opportunity to enrich her life so that she may enjoy it to the utmost. Good health and a wholesome outlook on life are things which the school of nursing can give the students toward this goal, through the means of a health and recreation program.



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XIV.

INITIATING A MORBIDITY SERVICE INTO THE PUBLIC HEALTH

NURSING STUDENTS RURAL PRACTICE EXPERIENCE

and

THE STAFF CONFERENCE AS METHOD OF ADMINISTRATION  
IN A COUNTY HEALTH UNIT

Margaret L. Payton