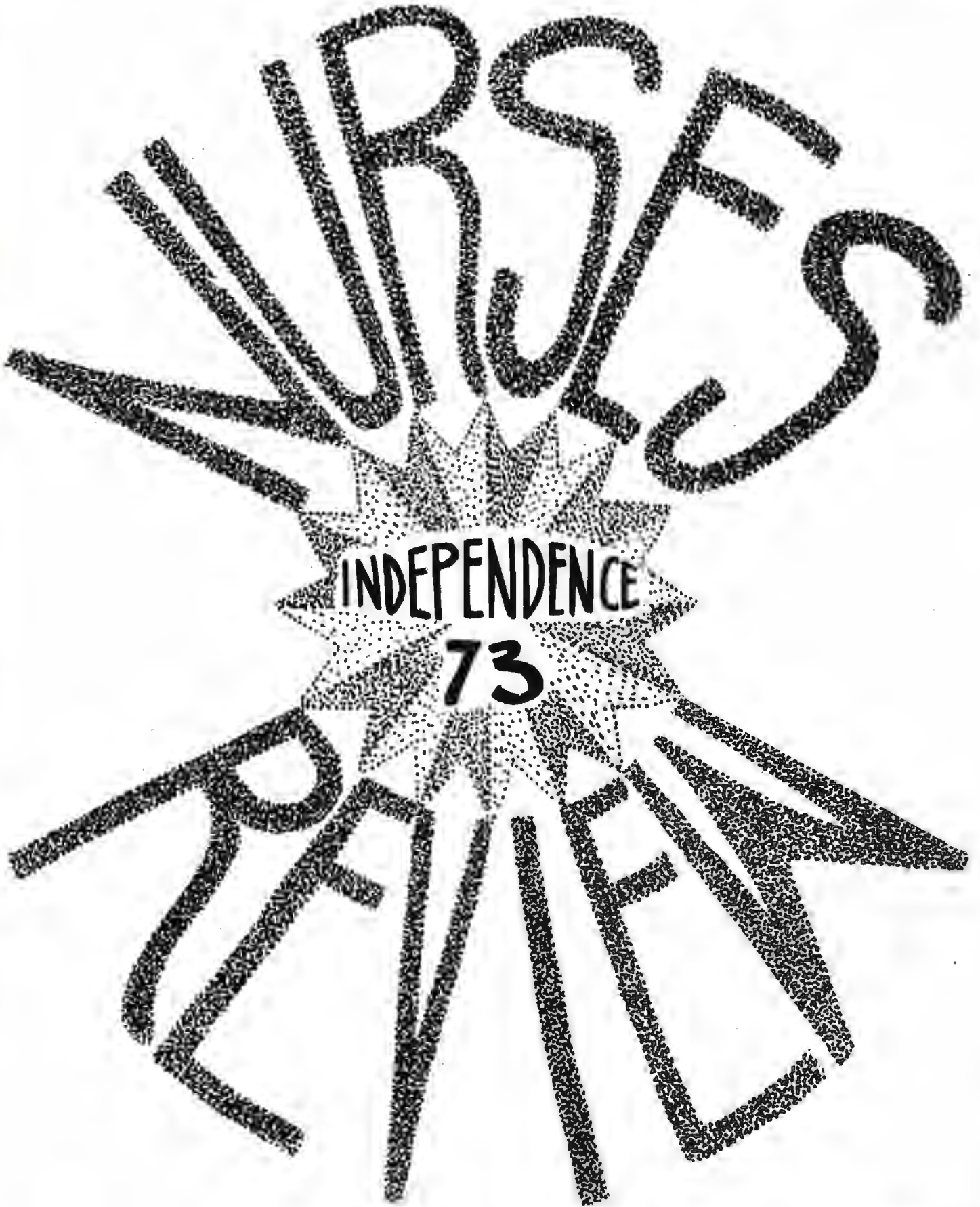


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THE OFFICIAL VOICE OF THE NURSES' ASSOCIATION OF THE BAHAMAS

MILESTONES

The Nurses Association of the Bahamas was received into membership with The International Council of Nurses on Friday the 18th May, 1973, at the closing ceremony of the fifteenth Quadrennial Congress held in Mexico City. Mrs. Ironaca Morris represented the Bahamas' Association and presented the application for membership, which was sponsored by the German Nurses Federation. The initial contact with the ICN was made six years ago by the late Nurse Vivian Longley.

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FOREWARD

By Miss Brendel Cox

President of the Nurses' Association of the Bahamas

THE ROLE OF A NURSE IN AN INDEPENDENT BAHAMAS

This year 1973, which is the 26th Anniversary of the Nurses Association of the Bahamas, is the most important year in the History of the Bahamas. Come July 10th the Bahamas will take its place beside other countries as the newest independent nation of the British Commonwealth. We as nurses should stop for a while and take stock as to the great challenge this presents to us.

The greatest challenge today is to keep up the highest standards of nursing in the Commonwealth of the Bahamas, which of course, takes dedicated nurses. Even though today the medical fields are wider, because of specialization, every nurse should be at her best in order that the Nursing Association function properly and effectively, so as to obtain the best results.

Nursing ethics cannot be divorced from nursing. The Nurses' Association has for many years, been trying to help and encourage nurses to live up to the high standard of this profession, which is not required only in the sick room or hospital wards, but also daily in the Community.

I also feel that we should take a more active part in community work apart from community nursing.

Some of our aims are to have better communication among the nurses and to strengthen the Association's morale, membership, and finance. If we can get these to work effectively, I feel that this association will be one of the strongest organizations in the Bahamas.

Here I would like to encourage nurses to join their professional organization; so that we can work together and do our part in nation building.

CONTENTS

REORGANISATION OF THE HEALTH SERVICES	A Loftus Roker	1
IN THE 'GOOD OLD DAYS'		4
THE ROLE OF THE PROFESSIONAL ASSOCIATION IN THE COMMUNITY WITH PARTICULAR REFERENCE TO THE NURSING PROFESSION	Patricia Fountain	5
THE SYRINGE	Susan J. Wallace	6
FROM THE PATIENT'S POINT OF VIEW	Barbara Duvalier	6
CHRIST AND THE NURSE	Collingwood Cooper	9
VALUE OF PLAY AND PLAY MATERIALS FOR CHILDREN	M. Antoinette Outten	11
CROSSWORD PUZZLE	Judy Major	12
CANCER OF THE UTERUS	George Sherman	14
MESSAGE TO OUR YOUTH	Merline Hanna	16
COMMUNICATION AND LEADERSHIP	Cleopatra Ferguson	19
RECIPE	Lela Fountain	21
HOPEDALE CENTRE: A SCHOOL FOR CHILDREN WITH SPECIAL NEEDS	Arlene Davis	23
WORKING MOTHERS AND THEIR CHILDREN	Andrea Archer	26
HIS SIDE OF HEAVEN	Ed Minnis	28
PSYCHO-SOCIAL ASPECTS OF BAHAMIAN SOCIETY — RESPONSIBILITY AND CHANGE	T. O. McCartney	30



Minister Of Health, The Hon. A. LOFTUS ROKER

REORGANISATION OF THE HEALTH SERVICES COMMONWEALTH OF THE BAHAMA ISLANDS

**By the Minister of Health
The Honourable A. Loftus Roker**

Previous experience has shown that any public programme is most likely to succeed if the people in general are properly informed of the aims and objectives of the programme and can identify themselves with the advantages to be gained thereby. I therefore welcome the opportunity to publish this article in the official magazine of the Nurses' Association of the Bahamas. In this way, all those persons to whom this book is circulated will be familiarised with the purpose of the reorganisation of the Health Services and will get to know the role which they are expected to play in the weeks ahead. The anticipated support and assistance of you, the readers, will therefore contribute to the lasting success of the reorganisation programme.

It might help to put the Ministry's

reorganisation programme in perspective if you are made aware of the matters for which I am responsible. My portfolio embraces Medical, Nursing and Health Services; Regulation of the Manufacture of Drugs, Food and Beverages; Quarantine; Public Health; Cleaning of Public Buildings, Roads and Parks; Port Health; Pharmacy; Vaccination; Dangerous Drugs and Poisons; Environmental Control; Garbage Collection and Disposal, as well as Housing.

The legal framework within which the Health Services operate is defined in the Statute Law of the Bahama Islands. As many of these laws are now outdated, steps are presently being taken either to revise the existing legislation or, where necessary, to enact new legislation.

Within a few short weeks the

Commonwealth of the Bahamas will become Independent and will assume all of the rights, privileges and responsibilities for building a nation. To a great extent the volume and quality of this nation-building programme will depend on the health of the Bahamian People — hence the reorganisation programme is directed towards the upgrading of the general standards of health care. The Government of the Bahamas has for some time been aware of the pressing need to upgrade the standard of health care service but this new commitment of nation-building has accentuated the need and so the reorganisation process was started well in advance of the actual date of Independence.

In the past, the primary emphasis within the Ministry of Health was placed on the alleviation of pain and

(Continued on Page 2)

(Continued from Page 1)

restoration of sound health. For this reason, a relatively high priority was given to curative medicine. The general purpose of reorganising the Health Services is to ensure that in future greater importance is placed on preventing illness and creating a healthy environment. The promotion of Tourism as a major contributor to the overall development of the economy requires a healthy and clean environment for the protection and encouragement of our tourist visitors.

As time goes on environmental sanitation will become more and more important. Increasing importance and attention will need to be given to the physical, chemical and biological contaminants of the environment. Among other things, these include liquid and solid waste, pollutants of the land, the sea and the air, pollutants of food and water supplies and particularly in Grand Bahama the dust, the petrochemical wastes and the oil hazards created by industrial enterprises. From the foregoing you will realize that the reorganisation of the Health Services has social as well as economic implications.

In order to achieve the previously stated objectives in the least possible time, I took action early in 1972 to enlist the help of the World Health Organisation and the Pan American Health Organisation. Under the auspices of these two organisations, a team of Consultants representing all aspects of Health Service Management, visited the Bahamas to review the present scope of activities within the Ministry and to examine its organisational structure together with its management systems. These Consultants identified the major problem areas within the Health Services and made recommendations for a plan of action

aimed at improving coverage, productivity and efficiency within the National Health Care Delivery Service.

Much publicity has been given to those recommendations which have been selected for implementation over a period of time. These can be briefly summarised as follow:

- (i) The creation of two parallel operational divisions, the one concerned with Personal Health Services and the other with Environmental Quality Development and Control.
- (ii) The phased construction of a building extension to the Princess Margaret Hospital.
- (iii) The provision of a greater number and a more equitable distribution of Medical Officers throughout the Family Islands.
- (iv) The orderly process of Bahamianisation through recruitment and training of as many deserving Bahamian young people as possible.
- (v) The promotion of increased efficiency and cost effectiveness of each individual unit of the Ministry through the development and use of management skills and management techniques.
- (vi) The collection and recording of health data and statistics, in conjunction with the Department of Statistics

as an aid to proper planning and management and as a means of anticipating crisis situations which tend to develop unnoticed.

- (vii) To renew and modernise the laws which govern the operation of the medical profession and medical services with particular emphasis on the protection and control of the environment.

The programme of reorganisation as outlined above will call for some expenditure of funds, but this will be spread out over a period of a few years. The ultimate objective is to obtain the maximum usage of the man-power, money and materials allocated to the Ministry. It is therefore most important that every staff member irrespective of grade or status should seriously and faithfully carry out his or her duty to protect the tax dollars, machinery and supplies which are entrusted to me in my official capacity as Minister of Health, but which really belong to all the people of this Commonwealth.

I sincerely hope that by publicising the plans for reorganisation of the Health Services, the public will be encouraged to reorganise their personal health habits in such a way as will ensure the happiness and well-being of themselves and their families, and ultimately of our community of Family Islands together with the visitors to our shores.

I take this opportunity to congratulate the Nurses' Association of the Commonwealth of the Bahama Islands on the publication of this interesting and informative magazine. ●

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IN THE 'GOOD OLD DAYS'

As members of the nursing profession look to the future with optimism at this time in our history, perhaps it is also wise to look back and see how it all began.

The following is a job description of a floor nurse in 1887. It was published in a recent issue of the magazine of Cleveland Lutheran Hospital. Exact date of issue is unknown.

In addition to caring for your 50 patients, each nurse will follow these regulations.

1. Daily sweep and mop the floors of your ward, dust the patient's furniture and window sills.

2. Maintain an even temperature in your ward by bringing in a scuttle of coal for the day's business.

3. Light is important to observe the patient's condition. Therefore, each day fill kerosene lamps, clean chimneys, and trim wicks. Wash the windows once a week.

4. The nurse's notes are important in aiding the physician's work. Make your pens carefully, you may whittle nibs to your individual taste.

5. Each nurse on day duty will report each day at 7 a.m. and leave at 8 p.m. except on the Sabbath on which day you will be off from 12 noon to 2 p.m.

6. Graduate nurses in good standing with the director of nurses will be given an evening off each week for courting purposes, or two evenings a week if you go regularly to church.

7. Each nurse should lay aside from each pay day a goodly sum of her earnings for her benefits during the declining years, so that she will not be come a burden. For example, if you earn \$30 a month you should set aside \$15.

8. 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.

9. The nurse who performs her labours, serves her patients and doctors faithfully and without fault for a period of three years will be given an increase by the hospital administration of five cents a day providing there are no hospital debts that are outstanding. ●

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The Role Of A Professional Association In The Community With Particular Reference To The Nursing Profession

By Miss Patricia Fountain

Before attempting to define what I consider should be the role of a professional organisation in our community, I think we should try to define what we mean when we speak of a profession. Nurses claim professional status and we should all be quite clear in our minds what this entails.

An American sociologist once said that one of the distinguishing marks of modern society is the emergence of so many professions. We seem to live in a society of professions. However, simply to label a person or function professional does not make it so.

A profession implies that the quality of work done by its members is of greater importance and a source of greater satisfaction in their own eyes and the eyes of society than the economic rewards they earn. If this is accepted there can be no doubt that nursing must be classified as a profession. But a profession does more than this; a profession gives service and the nursing profession has its roots in fundamental human needs.

A profession has an educational programme and it is the profession that is responsible for the education and training of its members. It has a body of knowledge that it utilizes in its practice and which it constantly enlarges and keeps up to date. It also does significant research. A profession must also provide intellectual leadership in its field.

An accepted principle of any profession is its responsibility for the service its members render to the community. It should be independent enough to determine its own standards and goals and should have a code of ethics by which members of the professions are expected to abide. Finally the true professional is given status in the

community; society accords him professional status.

It should be stressed that from the moment one joins a profession one is judged henceforth as a professional and is eligible to join a professional association.

A professional association is an organisation of members of a particular profession who have judged one another as professionally competent and who have banded together to perform certain functions which they cannot perform in their separate capacity as individuals. It is a voluntary association and usually has stated aims and objectives saying what it stands for, what it does and what it hopes to do.

Just about every professional association has as one of its aims and objectives the safeguarding of the social and economic well being of its members. An association may therefore be faced with the genuinely difficult task of reaching and maintaining a balance between protecting its members from exploitation by society and fulfilling its function to society when the interest of the association's members conflict or seem to conflict with the interest of the public or the stated aims and objectives of the organisation. The strength and leadership of the association will have a direct bearing on the amount of conflict an association will experience.

Traditionally, Nurses have not given a great deal of support to their professional organisation and this has hurt them in many ways, for example in bargaining for higher wages. While I do not think that the answer is a trade union, professional associations could learn a great deal from trade unions as regard skills of negotiation and techniques of bargaining. Nurses should therefore

strive to become better organised professionally so as to demand and be awarded higher salaries.

Let us now look at the role of the professional association in society, in the community in which we live. The sociologists define role as the pattern of behaviour appropriate to a particular position in a social structure. This means simply the part the professional organisation should play in the community.

The nursing profession enjoys a place of affection among the public and is respected. Therefore its members have an obligation to uphold the values and standards of the profession. After all, nobody expects to join a society or club without accepting the rules and if people adopt a profession they also undertake the responsibility which this entails.

One of the main roles of the nursing association should be to try to preserve those things which the public respects in a nurse. It can do this by enforcing those standards which the profession has set and when it does this it will gain respect in the eyes of the community. It is no good trying to persuade the community that the profession should be respected and highly regarded if there is no evidence that what you are doing deserves and earns regard and respect. Nurses should therefore keep the public informed about that is happening in the profession and this must be told to the community in terms of quality of service.

The emphasis in nursing at this time is on total care of the patient encompassing community care. The patient is seen as a member of his family and the family a part of the community in which it lives. The nursing profession therefore has a responsibility for the health of the

(Continued on Page 7)

POEMS

FROM THE PATIENT'S POINT OF VIEW

Here I am in my hospital bed
With bottles floating 'round my head.
Life water drips in my left forearm
And the blood on my right gives me cause for alarm.

My upper arms (by the holes in the creases)
Prove I've been hit by the anesthetist.
A nurse has shot a hypo (or three)
In my hips — to ease the pain in me.

The visitor standing in the hall
Must think that I'm a voodoo doll.

Barbara Duvalier

THE SYRINGE

Note: This poem gives away the poet's secret fear of injections when she was growing up. Don't tell anyone, but she is still afraid of nurses with needles.

I do not like a table top
Or surface flat on which to lie,
I hate with vengeance cupboard shelves
And closed doors that bar the sky.
Give me the freedom of the air
To take a stance and perch with poise,
That my attack so sudden be,
My victim does not make a noise.

And then upon the flesh I feed,
Or better said, it feeds on me,
For satisfying pressure squirts
My inside forth, and leaves me free
To make withdrawal, spent and weak,
And lie on table top or shelf,
'Til once again a hand comes forth
And fills me full to my old self.

Susan J. Wallace

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(Continued from Page 5)

entire community and in order for nurses to function in the community with interest and thoughtfulness the professional must know what is going on there.

Nurses need to be able to recognise problems in the community that will affect patient care and either individually or collectively through their professional association contribute their solutions to these problems. They cannot do this unless they know the social and economic factors affecting the patient and the community conditions and resources. If service is to be meaningful to the patient and the community it must reflect the needs of the patient and the community with the awareness that needs constantly change.

Change goes on regardless. It is an essential life process. In order to adjust to community needs and make its role more meaningful the nursing profession must therefore become involved in meaningful activities. One of the most important things the nurses' association can do is to impress very early in the minds of student nurses

— the future members of the profession — that they should become involved in community life, exercising their rights and accepting their responsibilities.

There are political, economic and social changes taking place within our society. How much thought has been given as to how these will affect the aims and objectives of the nursing association?

Let us look at some of the problems in the community at this time. Alcoholism, drugs, housing, crime, juvenile delinquency, the aged in the community, the increasing number of women who have the sole responsibility for supporting their families. How much thought has the nursing profession given to these problems? What can nurses do about them?

Do nurses as a professional group know what is happening in education in the Bahamas today? Do you know the facilities offered? Is your own nurse education programme sufficiently stimulating to attract and keep the people you want? What about your own education? Is anything being done to encourage suitable nurses to

consider university programmes? Surely these are the future leaders and they must start to prepare themselves now.

There are great political, economic and social changes taking place within our society. Our country is on the eve of Independence. When a country achieves nationhood the consequences are far-reaching in every walk of life. How will independence for the Bahamas affect the nursing profession? Perhaps you may think not at all but more importantly nurses must think about such things. Do you not feel that there are too many people making decisions for nurses who know nothing about nursing? If so, are you preparing yourselves through your professional association to speak for nurses in an intelligent and articulate manner discarding some of the old attitudes and traditions when challenged by outsiders as being meaningless and irrelevant to today's needs? If not, you must be prepared to defend them intelligently. Professional associations must be prepared to withstand criticism both from the public and from their own members. A tranquil organisation may be a sign of complacency. Responsible criticism is good and if not forthcoming something may be wrong with the organisation.

In the past Bahamians were not encouraged to take on responsibility and use their own initiative. The time has now come for us to assume our responsibilities and become accustomed to the ever increasing demands which will be made upon us, accepting our responsibilities as good citizens and always looking after our weaker brothers and sisters.

Remember that service is the watchword of the nursing profession. This can be justified at all levels and may even be seen as an important aspect of service to God as expressed in terms of the Christian ethic in the words from the Gospel of St. Matthew.

"In as much as ye have done it unto one of these my brethren, ye have done it unto Me." ●



Members of the Membership and Publicity Committee are shown here, seated left to right: Mrs. Mary Ferguson, Sister Betty Ann, Mrs. Ophelia Munnings, Chairman, Mrs. Lelia Fountain, Mrs. Pearl Cooper. Standing left to right: Mrs. Meline Hanna, Mrs. Geneva Thornton, Mrs. Esmerelda Rutherford, Mrs. Nora Knowles. Other members are Mrs. Angela Carroll, Mrs. Andrea Archer, Mrs. Brenda Simms, Mrs. Antoinette Outten, Mrs. V. Bullard.

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CHRIST AND THE NURSE

What leads one to become a professional nurse is of prime importance. This work can only be seen in its true sense when one finds the motive outside oneself. The highest and most ideal reason for being a nurse is to regard it as a definite vocation from God. This becomes more and more convincing as we observe some of the things included in the duties of a nurse.

1. A nurse is one whose chief concern is dealing with sick persons. There is a very great difference between the actions of a sick person and those of a normal, healthy one.

The patient may become short of patience or stubborn, because of anxiety and pain. There is often the grave concern for members of one's family especially if children are at home without proper provisions, or if there are some family problems as a result of the actions of the husband or wife.

Special consideration is therefore necessary for the mutual co-operation of nurse and patient. It may seem to the nurse that such a patient is troublesome, and there is the temptation to retaliate, neglect or avoid such a person whenever possible. In such cases, Christian principles are to be exercised. There should be kindness, unlimited patience and sympathy. Patience is a virtue. It would make a great difference with such a patient, if he is convinced that the nurse is one who really cares and shares his suffering.

In agony one may become unreasonable and very much in need of comforting words. This gives the nurse a special opportunity to display the true spirit of the Brotherhood of Man. As in the case of Jesus Christ, the duty must be done without favouritism or discrimination. The nurse should be convinced of the value and importance of everyone, and in each person see and acknowledge in him the presence of God. This should lead the nurse to act, in the sense of one being called by God to this profession to represent Him in relieving the sufferings of man.

2. To conceive of nursing as merely a job undertaken because nothing better is available can become a disaster. Often the nurse is called upon to perform duties which are far from pleasant. Ordinarily, such would be classed as indecent, filthy, degrading; yet the true nurse goes about it with a smile, gladly doing what is needed to be done. Like Jesus, she does not become annoyed; nor does she refuse to enter the stable where a person lies. True love has no limits. No amount of money can compensate for the duties performed in the right way by the professional nurse.

3. Discipline plays an important part. Few persons seem to recognize the temptations to which a nurse is exposed. There are

long hours of the night when she is often on her own without a bodyguard. She often moves around alone, from place to place.

Then, there are many cases which involve privacy and complete bodily exposure. Human nature, being what it is, a nurse could very easily succumb to immoral desires when dealing with patients of the opposite sex. Fortunately however, privacy and professional skill are in her favour. Lust and love are very powerful. Unless the nurse sees God in her work, she may easily yield to such temptations and ruin her career, or become a mother before time.

She is also expected to exercise discipline entailed in relationship with her superiors. The demands are not always convenient or desirable. The kind of humble obedience demonstrated by Jesus will inspire her to accept the instructions that are given

To all nurses may I say that God who has called you to this important profession, will provide the necessary grace by which, with your efforts, you can become successful.

You will have times of discouragement, periods when you may feel like giving up, but remember the words of Jesus: "Inasmuch as ye have done it unto one of the least of these my brethren, ye have done it unto Me." ●



The official seal of the Nursing Council was designed by Nurse Dorothy Morris, who became a State Registered Nurse last year following studies at the Princess Margaret Hospital. She is pictured here (right) with Nurse Hilda Bowen, chairman of the Nursing Council and senior nursing officer of the Bahamas.

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THE VALUE OF PLAY AND PLAY MATERIALS FOR CHILDREN

-- ----- By M. Antoinette Outten -----

The value of play and play materials in the development of the child is not recognized by many people in our Society.

Play is the really important business of childhood, a way for the child to practise skills, discover, create and imagine things, and to solve problems. Participation of the parents in play is an important as play itself is to the child.

Children learn by the example of adults around them and often children do not see us as relaxed, talking, smiling people. More often they see us ordering them or others around, arguing and quarrelling among ourselves, so these are the examples from which they will learn unless we sit down with them and while playing, show them others.

I. Learning

Learning as play is the foundation for intellectual development. A child who has a variety of materials for play and play experiences receives preparation for formal learning. A variety of things to feel, touch, manipulate, combine, and make into other things can be found among discarded materials. Here are some examples.

- a) A clock — this can be used to learn numbers and to learn time.
- b) Scraps of materials — these can be used for sewing.
- c) Blocks from carpenter — these can show varying shapes, sizes, forms, and numbers, eg. the child may discover that two together is the size of one.
- d) Pots, pans, and containers — these can be used for playing house and imitating mother, so that the

children are prepared for caring for their own homes.

e) Lengths of rope, old twine — these can be made into swings.

f) Thread reels — Here you have counters for children, and potential dolls when strung together.

Apart from being economical toys, children are more fascinated by these than store-bought toys. Other materials are water and sand but one must be more careful when using these.

Excursions to places such as parks, Sea Floor Aquarium, farms, packing plants, warehouses, fire stations, laundries, supermarkets, the dock area or the airport can provide a variety of first hand experiences for them. Also reading stories to children at home helps their imagination.

We can also promote learning by encouraging language. This can be accomplished by attaching names to objects, asking questions, calling attention to qualities, similarities and differences. The child can then organise and classify things in which he is interested; for example, using stones, he may discover some to be smooth, rough, some small, some large. Interests and comments from parents help to organize and develop his ability to learn concepts, to communicate with others, and learn from other people. On a journey in a car the parent can show the traffic light and its colours.

While it is useful to be able to speak easily and comfortably, using correct grammar, and understanding a large number of words, it is not always easy to put into words what

one means. For example, even as adults at times we believe that we understand something, but we are unable to explain it to someone else. To help our children to master this skill, we should talk **with** them, discuss things **with** them to help them learn how to discuss and express themselves. Parents should be encouraged to read to their children and supply reading materials if possible.

II Relieving Anxiety and Fears

The child uses play for this. He may be anxious about many things, but in playing he makes things happen the way he wants. Dramatic play is a great reliever of fears.

For example (a) He might fear being little — So he plays at giant steps or being cowboy.

(b) He might be going to the doctor — He plays at being doctor which makes his having an injection less upsetting.

III Expressing and Communicating Ideas

Children express feelings about the world around them and the people in it. This is displayed in role-playing or home making play where they are able to express their feelings by playing mother, father, baby. If a child is jealous of a newborn brother or sister, she may be seen pushing her doll and carriage. In her mind she is pushing away the new baby.

Ideas, thoughts and feelings are also expressed when playing with
(Continued on Page 24)

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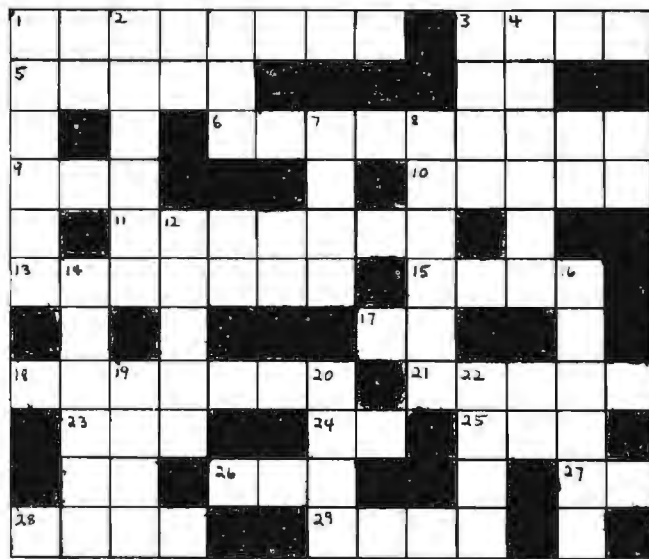
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ACROSS

- Inability to sleep
- Inflammatory condition of sebaceous gland.
- A prefix meaning death.
- A degenerative change caused by various poisons.
- Out of health.
- A prefix signifying between.
- Dilatation of a canal or organ.
- A chronic state of tension affecting both mind and body.
- An aromatic Balsam.
- French word for you.
- A spoon shaped instrument.
- A sudden fall in blood pressure and rise in pulse.
- A number.
- Blessed are
- A malt liquor flavoured with hops.
- Part of the foot.
- Abbreviation for treatment.
- A superficial eruption of the skin.
- To fly high.

DOWN

- Innermost coat of an artery or vein.
- The head of the tapeworm.
- Soon.
- Relating to the ribs.
- Coloured like a red rose.
- A space or opening.
- A genus of blood sucking bugs.
- A sensation of sickness with a feeling to vomit.
- An erosion or loss of continuity of the skin.
- A Go-Go.
- The organ of sight.
- A delicate epidermal filament growing out of the skin.

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CANCER OF THE UTERUS

By Dr. George Sherman

Cancer is often a curable disease and cancer of the uterus or womb is potentially one of the most curable forms of cancer.

Uterine cancer, like other types of cancer, is made up of abnormal cells which multiply. The cells grow to form a tumor which invades surrounding normal tissue — eventually destroying the organ in which it originated. If the disease is unchecked, cells from the tumor are carried through the body's two general circulatory systems — lymph and blood systems — to other areas of the body. There they set up new destructive growths. This process is called metastasis, and cancer that has spread in this manner is said to have metastasized.

Most cancer of the uterus begin in the lower part of the womb called the cervix, or neck. Some arise in the corpus, or body of the uterus, which is the upper part. If uterine cancer is allowed to develop, the cancer cells may spread directly to the vagina, bladder and rectum. Or they may spread through the lymphatic system to lymph nodes within the pelvis, or through the bloodstream to distant organs such as the lungs. The symptoms of cancer of the womb are unusual bleeding or discharge. But these — which may also be caused by less urgent conditions such as infection — are the signs of established cancers. Fortunately, science now has a test which can find uterine cancers before symptoms occur.

THE TEST FOR UTERINE CANCER

Cancer of the uterus is now 5th in rank among cancer killers of women (the first 4 are cancer of the

breast, lungs, stomach and cancer of the colon and rectum). Yet most deaths from uterine cancer could be eliminated by widespread use of a simple, painless, inexpensive examination. This examination, known as the Pap test, can find uterine cancer in its earliest, most curable stages.

The examination, which involves the microscopic examination of cells collected from the vagina, was developed chiefly by the late Dr. George N. Papanicolaou, and is named for him.

The Pap test can be done in a doctor's office or a clinic, where a sample of vaginal fluid is taken, and later examined under the microscope. The test detects not only early cancers, but precancerous conditions — that is, it signals the dangers of cancer before the disease starts. If every woman had the test every year, most uterine cancer could be discovered in time for a cure. Fortunately, in some very early cases, a cure can be obtained without impairing a woman's ability to have children.

The reason the Pap' test works is that the body constantly sheds dead cells and replaces them with living ones. The cells shed by the uterus (womb) are found in vaginal fluid. These cells may reveal a sign of cancer or even of a precancerous condition. By taking a sample of the vaginal fluid and examining it under a microscope such abnormal cells can be identified.

If this examination uncovers suspicious cells, the next step in a physician's diagnosis is the removal of bits of tissue for further examination. This process is known as a biopsy. It is the only

certain method of diagnosing cancer.

TREATMENT

Once uterine cancer is diagnosed, it is treated by surgery or radiation, or by a combination of the two. Treatment varies for each individual patient. Factors such as the tumor's size, location, and extent of spread, as well as the general physical condition of the patient, must be considered in each individual case. In surgery the goal is to remove all of the cancerous tissue. It may be a relatively minor operation, for very early cancer, or for advanced cancer, an extensive operation.

There are two ways of using radiation to treat uterine cancer. Radiation may be beamed to the cancerous tissue from a source outside the body, such as an X ray or cobalt therapy machine, or it may be placed directly in the body, in the form of radium. Often radium is enclosed in a capsule which is inserted through the vagina to the cancerous site. No matter how radiation is used for therapy, however, the objective is always the same: to deliver a dose powerful enough to destroy the cancer, but not to great as to seriously damage normal tissue. Fortunately, most malignant cells are more sensitive to X ray than normal cells. ●

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MESSAGE TO OUR YOUTH

By Nurse Merline Hanna

Mrs. Merline Hanna, a dedicated nurse and active member of the Nurses' Association of the Bahamas, does not limit her concern for humanity to her work in the hospital. She is also active in community affairs,

attends the Bahamas Baptist Bible Institute, and has written the following article in connection with her work as a Youth Counselor at Bethel Baptist Church.

1 Samuel 17:38-47

Saul made David put on his own armour and put a bronze helmet on his head and gave him a breast plate to wear, and over David's armour he buckled his own sword; but not being use to these things David found he could not walk. "I cannot walk with these," he said to Saul, "I am not use to them." So they took them off again.

He took his staff in his hand, picked five smooth stones from the river bed, put them in his shepherd's bag in his pouch and with the sling in his hand he went to meet the Philistine. The Philistine, with shield bearer in front of him, came nearer and nearer to David; and Philistine looked at David, and what he saw filled him with scorn, because David was only a youth, a boy of fresh complexion and pleasant bearing. The Philistine said to him, "Am I a dog for you to come against me with sticks?" And the Philistine cursed David by his gods. The Philistine said to David, "Come over here and I will give your flesh to the birds of the air and the beasts of the field." But David answered the Philistine, "You come against me with sword and spear and javelin, but I come against you in the name of Yahweh Sabaoth, the God of the armies of Israel that you have dared to insult. Today

Yahweh will deliver you into my hands and I shall kill you;"

There are many models we can extract from our biblical readings, but perhaps David is the most appropriate figure for youth in the Bahamas today as we approach nationhood. When we examine David's contribution to the nation of Israel, he can be seen as a revolutionary. The word revolutionary meaning "a complete or drastic change of any kind" (Webster's), carrying with it new insights and mode of action. Unlike the Philistines, David introduced a new mode of warfare using stones, sling shot and the immaterial armour of the Lord.

Today in the Bahamas, the youth are being called upon to introduce a still greater revolution which will reverberate in the lives of us all. They are being mandated to create a viable society by an individual and collective revolution against the social ills of our day. Just like David, their only vital armour must be their Christian heritage.

We read in Ephesians a similar call to youth. Ephesians 5:1-7
'Iry, then, to imitate God, as children of his that he loves, and

follow Christ by loving as He loved you, giving himself up in our place as a fragrant offering and a sacrifice to God. Among you there must not be even mention of fornication or impurity in any of its forms. . . . There must be no coarseness or salacious talk and jokes — all this is wrong for you; raise your voices in thanksgiving instead. For you can be quite certain that nobody who actually indulges in fornication or impurity or promiscuity — which is worshipping a false god-can inherit anything of the Kingdom of God. Do not let anyone deceive you with empty arguments: it is for this loose living that God's anger comes down on those who rebel against him.

In these few lines Paul gives a concise model for revolutionizing Christian Family Life. Every society, on a whole, is as good as one basic family unit. This is the mandate then, to which the youth of today can respond, for they are the future of the nation: to work towards the ever increasing stabilization of the family unit. Just as David's reward was that he "stood well" in the eyes of God and men, in the same way the youth of today should hope to "stand well" in the eyes of God and men. ●

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LEADERSHIP AND COMMUNICATION

By Cleopatra Ferguson

Leadership emerges as a consequence of the needs of group and the nature of the situation within which the group is trying to operate. There is no place for a leader unless there is a goal for which to lead. The effectiveness of the leadership will depend on the leader's understanding of the job, the individual, and the interpersonal relationships among the members working together. Therefore, Stogdill defined leadership as a "working relationship among members of a group in which the leader acquires status through active participation and demonstration of his capacity for carrying co-operative tasks through to completion."

Some leaders are chosen by the group under formal conditions, some may have it imposed upon him, and others may emerge spontaneously as a situation requiring leadership arises. In each case the individual is only leader in terms of his functional relationship with the group. To get information on how leaders were chosen, Jennings conducted a study at the New York State Training School for Girls.

The girls were asked to rate other girls according to preference in work, play and other activities. He found that the leaders attained their leadership positions because they met the psychological needs of the girls, that is, support, reassurance, goal setting and acceptance.

Leadership can be found at all levels of an organisation, but all persons in authority are expected to function and are looked upon as leaders. Here we need to distinguish authority from leadership. Authority is gained by virtue of position and involves the legitimate rights of requiring others to obey. On the other hand leadership is an interpersonal relationship in which others comply because they want to, not because they have to. Therefore, being in authority and being a leader are not necessarily the same thing, but good leadership is an asset to those in authority.

At least three styles of leadership have been recognised, autocratic, laissez — faire, and democratic. In the autocratic type of leadership the decision making lies within the leader. He does not understand the meaning of gaining co-operation of others. He dominates and does not delegate. Those below him are

"bossed". In the laissez — faire type of leadership the decision making lies in the individual in the group, but with the democratic type the decision making lies with the group. Here the leader knows the meaning of co-operation. He knows that those in his charge can contribute to getting the job done in the best and most efficient way. He gladly accepts their help and can draw on the ideas and knowledge of the group. A democratic situation is more favourable, although it takes a longer time for a group to reach a decision than the autocratic or laissez — faire situation. However, the implementation is more rapid and the members of the group are more satisfied that they have participated in the decision making.

Lewin, Lippitt and White conducted a study to find out the extent to which the style of leadership affected the group. For the study four groups of eleven year old children, with similar characteristics, patterns of relationship and the kind of activities they engaged in, were chosen. Each group was studied under authoritarian, democratic, and laissez — faire leadership. It was found that the democratic situation had the highest degree of team spirit and co-operation, opposite to that of the laissez-faire, and especially the authoritarian where a great deal of passivity or rebelliousness was displayed. This study suggests that a democratic type of leadership can satisfy basic human needs more completely than the others. It is only when these basic needs are satisfied that the group members are motivated. The results being greater satisfaction and, therefore, great co-operation.

Basic human needs involve the individual's need to belong to a cohesive group, and to feel that his contribution, however small, is important. The function of the leader is most important here as he is responsible for organising the activities of the members of the group, toward accomplishing their goals. He is also responsible for the maintenance and strengthening of the group itself. The most productive group with high morale, is one where there is distribution of leadership functions. Each member does the job that he is capable of doing while a feeling of "welfare" is generated, and members are willing to bear pain and frustrations for the group. This will result in maintaining the cohesiveness of the group.

Other important functions that the leader can display in maintaining the group's cohesiveness and members morale are, those of giving praise when due, becoming interested in the development of the individual, and to show respect for him as well as fairness and impartiality. The leader should also set the example by being willing to do a job himself no matter how unpleasant, perform at high level himself, and discipline himself before disciplining others. In this way the leader can gain, maintain, and enhance group co-operation which is most important in getting the work done.

So far I have discussed leadership, how it emerges, its functions and effects of its various styles, but for leadership to be effective there must be a good system of communication. This is essential for producing a

(Continued on Page 20)

(Continued from Page 19)

feeling of security among the members of the group. With this type of atmosphere the leader can detect grievances and do something about them before they affect the group production and lower morale.

Communication then can be defined as the process by which messages, thoughts, opinions or information are exchanged or shared between individuals. This can be verbal (i.e. consisting of written or spoken word) or non-verbal (consisting of facial expression, gesticulation, wordless sounds and even silence.) When communicating with members of the group the leader should seek to clarify his ideas before communicating. Good planning will consider the goals and attitudes of those who will receive the communication, and those who will be affected by it. By examining the purpose of each communication he is able to identify what he really wants to accomplish with the message, adapt language, tone and total approach to serve that specific objective.

Consideration of the total physical and human setting is very important. The wrong timing, physical setting and social climate can present as a bar to communication. Consultation with others in planning the communication will provide a

broader understanding of the situation, and in turn a more effective line of communication.

Since one of the leader's aims is to satisfy the needs of the group he should take the opportunity to convey something of help or value to the receiver of his communication, that is considering the other person's interest and needs. The good leader follows up his communication. He should want to know if he had succeeded in expressing the true meaning and interest of his message. He can then evaluate the effectiveness of his communication.

The greatest, but most neglected aid to communication is listening. Respect is gained when you listen to the other person, although respect should be mutual, on the part of the initiator as well as the receiver.

Here are ten commandments of good listening every good leader should observe:

1. Stop talking! You cannot listen if you are talking. Polonius said "give every man thine ear, but few thine voice."
2. Put the talker at ease. Let him feel free to talk.
3. Show him that you want to listen. Look and act interested.
4. Remove distractions.

5. Empathize with him.

6. Be patient. Allow plenty of time. Don't interrupt him.

7. Hold your temper — An angry man gets the wrong meaning from words.

8. Go easy on argument and criticism. The person may "clam up" or get angry. Don't argue, even if you win or lose.

9. Ask questions — This encourages him and shows that you are listening.

10. Stop talking'. This is first and last because all other commandments depend on it. Nature gave you two ears and one tongue which is a gentle hint that you should listen more than talk.

In conclusion, we see that leadership is necessary in any group, formal or informal. whether it be a boys club or a sophisticated organisation. There must be effective leadership if the group is to function efficiently for a common goal, and to maintain its cohesiveness.

Good communication is the most important factor in effective leadership. Therefore, when communication is mastered, very little is left to be desired. ●

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RECIPES

L. G. Fountain

CURRY OF CRAWFISH

- 1/3 cup butter or margarine.
- 1/2 cup chopped onion.
- 1/4 to 1/2 cup chopped green pepper (sweet pepper)
- 2 cloves garlic minced.
- 2 cups dairy sour cream.
- 2 teaspoon lemon juice.
- 2 teaspoon curry powder (or to your taste.)
- 3/4 teaspoon salt.
- 1/2 teaspoon ginger powder.
- Dash chili powder
- 3 to 4 cups cooked picked crawfish.

METHOD

Melt butter. Add onion, green pepper, garlic. Cook until tender, but not brown.

Stir in Sour cream, lemon juice and seasonings.

Add crawfish.

Cook over low heat, stirring constantly until hot and light brown.

Makes 6-8 servings

Can be served over hot white rice or yellow rice.

Offer coconut, raisins, chopped peanuts, or chutney with it.

DRY FISH WITH CABBAGE

- 1/2 cup butter or margarine.
- 1 cup chopped onion.
- 1/2 cup chopped green pepper (sweet pepper)
- 1 St. of celery chopped fine
- 2 clove garlic minced
- 3 teaspoonful lemon or lime juice
- 3/4 teaspoonful salt
- 1/4 teaspoonful fish season.
- 2 cups chopped cabbage
- 3-4 cups cooked picked fish
- Red or cayenne pepper to taste
- 1/2 cup of tomatoes or 1 teaspoonful of paste
- 1/4 teaspoonful thyme.

METHOD

Melt butter. Add onion, green pepper, garlic, celery, tomatoes or paste

Cook till tender but not brown. Stir lemon or lime juice & seasonings.

Add dry fish.

Cook over low heat stirring constantly, just till hot through and light brown.

Makes 8 servings

Can be served over bare foot rice or johnnie cake.

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ANSWERS TO CROSSWORD ON PAGE 12

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HOPEDALE CENTRE

A School For Children With Special Needs.

By Arlene Davis

"Every child has his own limitations. The really essential thing is this: that having given the child all the help one can, he is accepted for what he is, with his limitations and assets; that he should be helped to the extent of his ability to face his limitations and develop his assets to the fullest; and that at all times he should feel loved and wanted."

Illingworth

The comment above expresses the philosophy that is the foundation of the nation's first school that is involved solely in REMEDIAL, REHABILITATIVE, and SUPPORTIVE work.

Hopedale Centre opened its doors on January 8th of this year. It offers a unique learning environment to children who are unable, for various reasons to participate in regular school situations, to cope with reasonable pressures in their home surroundings or who are experiencing academic difficulty.

Here at the Centre we believe that educating the SENSES, FEELINGS and EMOTIONS is as important as educating the intellect — thus the arts form an integral part of the total programme.

In Creative Drama every child can experience self-worth and happiness in doing his own "thing" without being judged by other people's standards; children who have never related to others can begin to communicate. The teacher initially provides the stimulus, but each child

is free to express himself in his own unique way.

Art is a natural language through which the child expresses things important to him. He can often communicate feelings and ideas through art before he can do this verbally.

The gym programme also encourages the active participation of each child. Through corrective physical education the child develops better body awareness, a sense of relationship of himself to space, better co-ordination, and he learns to co-operate with others in play experiences which are fun.

Class sizes are necessarily small. Play groups are somewhat larger to facilitate interaction with peers. The instruction is individual and diagnostic. From tests and observations made of each child, by a consultant psychologist, the teacher knows his strengths and disabilities. We make use of the child's strength and/or capitalize on special interest to give him experience in succeeding at tasks and then work to help him overcome his disabilities or develop his assets. A child has to successfully complete one activity, or subject, or fully understand one concept before moving on to the next.

Such children have had many failures and usually have a poor self-image. It is often necessary to go back to a level at which they can succeed. For most it means going back to a readiness level. If a child experiences success in his un-

dertakings he will develop a willingness to try, a trait often lacking in the child who has been exposed to criticism at an early age.

Materials are chosen to develop co-ordination, assist in perception and cognition. No one school of thought is employed in choosing methods and materials.

Parent participation is advisedly encouraged to help achieve a total living concept. One of the most important ideas of Hopedale Centre is a Management Programme for parents, thereby offering a better understanding of their child's disability and how to cope with, or handle effectively, day to day problems which arise. This procedure helps parents to become acquainted with the programme, to explore the possible limitations and the future of their child.

There are no magic wands to wave to restore the ability of our children to learn at the level of their peers. Probably the closest we can come to magic wands are structured programming, individualized instruction, acceptance of the problem by parents and the dedication of the teacher trained for this very special redeeming work. ●

Hopedale Centre is located on College Avenue, Oakes Field, and has a staff of two specially trained teachers and the services of a consultant psychologist and a speech therapist. For additional information contact Mrs. Davis at Phone 35492 or P. O. Box N8883.

The Value Of Play

(Continued from Page 11)

blocks, sand, paint, clay, etc. For example when painting, if a child is sad, he may paint sad pictures or use dark or black colours. If he is happy and gay, he uses bright colours. When he is successful in piling his blocks on each other he may be seen jumping up and down, or knocking them over and trying again.

IV Aiding Physical Development

Play encourages activity for daily living and aids physical development.

By riding a tricycle, he expends energy, develops his muscles and learns co-ordination.

V Establishing Social Relationships

Children come to know each other by playing together. They enjoy activities more in the presence of other children. They play in pairs

and groups, learning to lead and follow, co-operate and disagree, share experiences together and to have a chance to find satisfaction which lies in companionship and having friends. They can stand up for themselves, learn to give and take. Out of success and failure, they build patterns of living together. These experiences are an important part of the process of socialization and can be achieved in early childhood by the use of nursery schools. Children need plenty of time at play, and parents should not discourage this by calling and interrupting and asking them to find something better to do.

VI Helping to Restore Emotional Imbalance

Children who are emotionally ill can often be helped through a process of play therapy, where they deal with fears and conflicts by playing them out.

Characteristic of Play Materials

- (a) It should be safe, sturdy and able to withstand hard treatment.

- (b) It should have more than one use and many if possible, e.g. blocks, pegs, rings.

- (c) It should encourage imaginative play.

- (d) It should offer possibilities for learning e.g. puzzles, books.

- (e) It should invite the use of more than one child at a time e.g. sand-box, swings.

- (f) It should be appropriate to the age and stage of the child.

Throughout a child's development, he can be helped enormously by the play and play materials that are appropriate to the needs of each stage. They should avoid unnecessary frustration and never be too difficult to use successfully. Those can be used both to express feelings and, however indirectly it may be, to acquire knowledge. A child's success in learning depends largely on the opportunities he gets. ●



The delegation of nurses who attended the ICN Conference in Mexico during May are shown here on their return to Nassau. Pictured from left are Nurses Elaine Dorsett, Marilyn Bethell, Ironaca Morris, Geneva Thornton, Dorothy Phillips, Susana Roberts, Brendel Cox, President of the Nassau Association of the Bahamas, Helena Francis, Deanna Saunders, and Mary Butler. Mrs. Morris was the official delegate to the Conference, at which the Bahamas Association was received into membership with the International Council of Nurses.

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WORKING MOTHERS AND THEIR CHILDREN

By Mrs. Andrea Archer

The topic "working mothers" has now seemed to be a controversial subject. These mothers have been acclaimed as contributing to the delinquency rate and maladjusted children due to deprivation of the maternal contact. However, there is insufficient substantial evidence to confirm these statements.

Any group of people who are interested in children finds itself, sooner or later, discussing the children of mothers who work outside their homes. How many of us are well aware that mothers who look after their young children and their homes are also working mothers!

Most mothers in the Bahamas are working class women and empirical knowledge of their attitudes to work or reasons which led them to seek it, or the family problems and adjustment to which it gives rise, is limited. In this way, as in other areas of social life, ignorance of facts has not prevented ardent controversy.

On the one hand, there are those who stress the value of the married women's independence and the advantage their families gain from wider social awareness and large incomes that result from work outside the home. On the other, there are many who count a mother's absence at worst, a disaster for her family. These attitudes are not grounded in knowledge of modern society. They stem from an echo, with doubtful relevance, of 19th century and early 20th century controversies and are thus part of our past in our present.

A mother's decision to go out to work may sound a relatively simple one but it is the resultant of many factors. Mothers themselves usually give several reasons for working. Often there is a major reason and several subsidiary ones. Moreover, the reason or reasons which prompt the mother to go out to work directly affects the family situation. If she goes unwillingly to work for reasons of sheer economic necessity, the

result in terms of her own or her children's reactions will be very different from the result when she works to escape loneliness or the restricted life she leads.

From my experience, the mother who works because she must, is obliged to accept arrangements for the care of both her home and her children which she would not do if the economic pressures were lighter. Her ability to cope with two jobs will also depend to a considerable extent on her motive for working.

Main reasons given:

- (1) Financial:
 - i Sole supporter
 - ii Husband unemployed, invalid
- (2) Other:
 - i Boredom, companionship
 - ii Professional or Vocational interest
 - iii Other including medical advice and self employment.

Financial reasons can be interpreted in many different ways, but broadly speaking, there are those who regard the extra earnings as an important addition to the family budget. The widows, divorced and separated wives, and unmarried mothers almost unfailingly fall into the first category.

One of the influences causing mothers to seek employment outside the house is the dual factor of loneliness and boredom. A number of women have been recommended to work by their doctors which shows an interesting recognition of the therapeutic value of an outside interest and occupation. Mothers who have been trained for a profession or some other highly skilled occupation often want to continue or seek outside employment because of a liking for the job itself or by sense of vocation. Their decision is complicated by the fact that they may lose some of their skill if they give up work for some years.

Mother's attitudes

Many mothers today feel guilty if they work and, though this is sometimes forgotten, many feel guilty if they do not. Nevertheless, although some working mothers, particularly those who have young children, may feel guilty about going to work, this may co-exist with a sense of satisfaction and achievement. Most of them express positive enjoyment in their work. On the whole, working mothers seem able to rationalize their position more successfully than non-working mothers.

Husband's attitude

There is a general tendency for husbands in the Bahamas to accept their wives going out to work as a necessity and in some instances, find employment for their wives. A small number of them help, at any rate in part with the domestic chores. I have found that the husband's co-operation extended far beyond the traditional masculine aids of decorating or repairs. In some homes, he has been firmly incorporated into the week day routine of working and cooking, as well as acting as the sitter when his wife was at work.

Child's welfare

The quality of substitute care which the working mother provides for her child is one of the most important factors affecting his well-being and future development. There are two categories of care for the pre-school child of working mothers individual care and group care.

In the Bahamas, the majority of the pre-school children are cared for by relatives and neighbours although the private nurseries are in great demand. Some of the mothers pay for the care of their children while others pay in kind. The grandmother is indisputably the most popular mother substitute. Neighbours and friends are more often used by full time working mothers and relatively few part time

(Continued on Page 27)

(Continued from Page 26)
mothers use this arrangement.

The type of group care used depends in part on the mother's circumstances. Child care minders and day nursery care are almost limited to the children of full time working mothers and among these, high priority is given to families where the mother is the sole wage earner, unmarried mothers usually heading the list.

Difficulties arise in the provision of care for the older children. They either play the role of supervisor over the younger school children or manage on their own until their mothers return from work.

The difficulties and distress facing the widowed, divorced or deserted wife, or the unmarried mother, will vary enormously but in the long run, unless they are fortunate enough to possess a private income or to have the financial support of their families, or make or complete a

family by marriage or remarriage, they will be faced with the common problem of making ends meet for survival.

What are the effects on children's physical and emotional development of the mother's absence at work for all or part of the day? Are those effects due to the fact of separation itself, the length of separation, its frequency, the quality of the substitute care, the age and sex of the children or any other definable factor?

We recognise that as far as needs of the children are concerned, this division may be artificial. Nevertheless, the fact that a child who goes to school is away from home for the whole of the school day, produces a sudden enlargement of his environment and change in his daily routine. These factors produce the possibilities of his mother going out to work.

The working mother's own at-

titude to employment in part reflects the attitudes of her husband and children as well as the general, social climate, but it will in turn affect both her husband and her children and will to some extent, condition their attitudes towards her working. Many working mothers feel that their lives and the lives of their family have benefited. Often the relief from financial anxiety itself has contributed to a relaxation and improvement in family relationship that could not but be beneficial to children.

In these families too, the children may be encouraged and expected to take a more active interest in the life of the household and of the family and may have greater opportunities to show their initiative and to grow independent. Altogether family life for the children of such working mothers can be richer and fuller, a not unimportant basis for their later development and the eventual founding of their own families. ●

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By Mr. Ed Minnis

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Still he tries to live a life
Like a normal boy or girl
But children laugh at him
His parents are ashamed
Can't they see what they're doing
Causing him so much pain

It's raining
On his side of heaven
It's raining
But he doesn't know why
Is anybody here
Going wash away his tears
Or will we just let him die.

It doesn't take money
To help him through each day
All it takes is a friendly smile
When we walk his way
Living isn't easy
When you're different from the rest
But I know he can make it
If we all try our best.

* * * * *

Words Of Wisdom

Contributed by
Sister Ophelia Munnings
Chairman of Publicity Committee

Please yourself
and vex all fools.

Choose not your friends by outward show.
The petals float, the pearls lie low.

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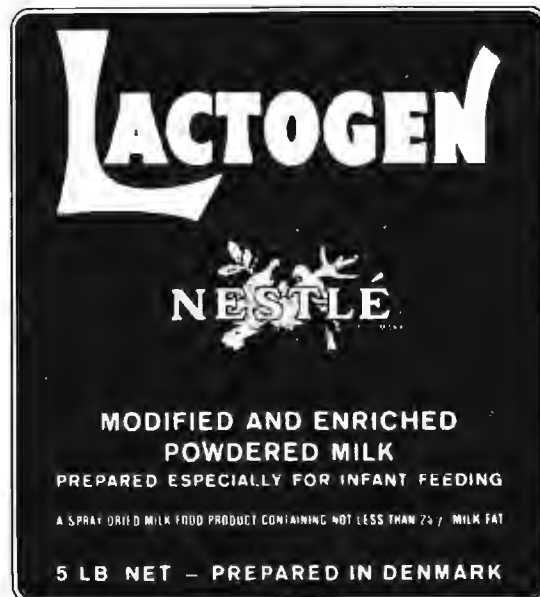
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PSYCHO-SOCIAL ASPECTS OF BAHAMIAN SOCIETY

RESPONSIBILITY AND CHANGE

By T. O. McCartney

B.A., Doc. Univ. Psychol. (France)

Clinical psychologist

In any society the needs and problems change considerably as we pass through different life periods, for each age has its own particular pressing needs and important adjustments to make. The approach to preventing catastrophes which plague communities should be toward preparing and helping people, especially young people, to deal effectively with normal life stages through which all human beings pass.

More so, if deficiencies are recognized, if new ideas are put forth, and if our present generation are brought up in an atmosphere of enquiry, respect, understanding and action, further problems would be minimized. We all realize what tremendous stress and strain modern day society has brought upon us. We, in the Bahamas, at the present time, are going through a transitional phase whereby we look for new directions, philosophies and guidelines. With the conquest of so many of the immediate physical ills which have affected man throughout his history, he has become increasingly aware of the role of psycho-social factors in human happiness. No longer are civilized man, at least the fortunate majority, the victims of famine and epidemics. The black plague has been replaced by a host of subtle psychological plagues-worry, insecurity, disillusionment; doubts as to whether one can weave a suc-

cessful and happy course through the complex maze of super highways and blind alleys that make up modern existence. Thus modern youths' path to happiness is not an easy one. It is beset by seemingly endless personal and social problems.

The most dramatic revolution to my mind, of the past decade, has been the emergence of an advanced technology creating new concepts in space, time and human relationships. Today, Bahamian youth are the first generation to be raised on T. V., cinemascope, stereo-sound and transistors. Youth have suddenly been ushered into the space age. The electrified mass media give us instant communication. Messages race to bombard our senses from everywhere. Youth of the T.V. set are able to perceive the world in terms of patterns and inter-relationships. Young people, today, tend to have a broader appreciation for the interconnections of social and political events.

Let us focus our attention on the psycho-social diseases in the Bahamas and examine some efforts of Bahamian society to see if we can discover something meaningful to us all. In order to do this I will deal primarily with my field of **mental health** and evolve a rather new concept of disease. Mental health is not only the study of mental illness but the study of **man in society**.

For purposes of discussion, I offer here an operational definition of disease: "departure from normal biological or social means of coping with the stresses of the internal and external environment". Disease occurs only when the individual's or group's biological, psychological or social survival is jeopardized and/or when these cause permanent or semi-permanent damage to the functions of man. With this in mind let us examine the following and perhaps discover our responsibilities and make us cognizant of the need for change.

In the Bahamas, we have a high incidence of alcoholism, a growing drug abuse problem, marital, racial identification, parent-child, religious and moral conflicts. These problems are not unique to the Bahamas but we must examine **our** psycho-social development and attitudes and create answers to **our** problems.

What then, is the responsibility of a community and how to initiate change? First of all, there must be a complete analysis of self. The individual must get himself "together"; only then, can we hope to become effective instruments of change. There are six (6) levels of prevention that can be taken:

I. Community organizations — improving and broadening educational programs by the maintenance of a

(Continued on Page 32)



The service to commemorate the birthday of Florence Nighingale was held on the 11th May, 1973 at St. Joseph's Church. Pictured here is the group of nurses attending the

service, which was conducted by Father Sullivan, pastor of St. Joseph's parish.

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(Continued on Page 30)

high level of community morale, through varied cultural and social programmes run by people aware of psychological and emotional needs present in the community and by the establishment of recreation and leisure time activities for citizens of all ages, etc.

2. The elimination of deprivation. Both official agencies and voluntary helpers are important to this work.

3. The interruption of pathogenic trains of events by diminishing or eliminating stress which leads to disaster.

4. The prevention of major mental illness, delinquency, drug addiction, etc., by early detection and referral to available community resources.

5. The arrest of illness by treatment and the subsequent rehabilitation of the ill through co-ordinated activities of private and government sponsored facilities.

6. The prevention of permanent disability by the treatment of psychological disturbances. This treatment would consist mainly in early detection and and referral.

In conclusion, no innate conflict exists between what is beneficial for an individual and what is beneficial for his society. If one is creatively developing his potential he inherently will contribute to the building of a better community for all.

Last but not least, there must be a re-commitment to the ideals of a

Christian philosophy, on which this Bahamian community was built. ●

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