

one point, both theological and scientific agree: Cures *are* performed.

Of course, Nurses who are familiar with cases of hysteria, etc., will have little difficulty in explaining many of the undoubted cures. The special nursing of a sick pilgrim is most simple. Beyond ministering to his usual ailments, his Nurse has on this occasion to keep his mind in a state of hopeful expectation.

Those who have ever watched the procession of a party of pilgrims through the streets of a Roman Catholic town or village, can scarcely fail to be more or less affected by the sight. In divided pairs or single file, their lips moving in prayer, their fingers busy with their rosaries, walk every sort and condition of humanity. The old woman fervently pleading for light to her age-dimmed eyes; the workman, with limbs hopelessly crushed by a machine, demanding sullenly, almost fiercely, the restoration of his Samson strength; the youth whom consumption has claimed as its victim; toddling children who scarcely realize their troubles, guided by mother with aching hearts, hearts which in wax effigy they literally carry in their hands, and offer to their saint; and among them all groups of fair girls, clothed in pure white, carrying between them a kind of stretcher, on which stands the image of the Virgin, wreathed in flowers; Priests, banners, choir-boys, lines of reverent, cynical, or awed bystanders complete the picture. Interest, excitement, hope, have roused the sufferer to a state of nervous expectation, and exaltation that culminates at the goal of pilgrimage. Miracle-working images generally have a kind of museum of trophies around them, consisting in wax models of various portions of our frail human frame. These are pilgrim offerings. The different anatomical fragments are illustrative of so many afflicted members the saint has been requested to interest himself in. Among these are bandages, splints and crutches, undoubtedly cast away by pilgrims, and preserved as tokens.

Constantly, one reads or hears of girls rising from the stretchers on which they were carried, to exclaim joyfully: "I am cured!"; of paralysed beggars and well-clothed cripples throwing aside their supports; of the mute, speaking. These facts are not merely fanatical inventions. From the unbiased point of view of a moderate English Churchwoman, I can vouch, from actual knowledge, for the genuineness of actual faith cures.

The Roman Catholic nuns, thoroughly convinced as they are of the power of religious conviction, are excellent Nurses to those whom they sometimes influence into trying the effect of a pilgrimage. The whole course of preparation is calculated to fix the sufferer's mind on the *probability* of a cure. He is gradually forced into feeling the absolute power for good of a beneficent being, inclined to

heal, and he feels that recovery is in hands that are only too willing to bless. We all advocate the expediency of keeping patients in a hopeful frame of mind. Who can doubt that a systematic course of moral bracing among favourable surroundings has very often restored the shaken will power in a way Roman theologians would describe as "miraculous."

Sudden cures are not uncommon, neither are relapses. Those who see the lame man walk joyfully from the shrine or image, and hear the mute express his gratitude, must not consider their nursing over, until they have thoroughly assured themselves and their patient that the improvement is permanent.

In many country districts, curious, even dangerous, superstitions exist in connection with the care of the sick. Who has not come in contact with the aversion for air and water, that sometimes converts the cottage sick-room into a Black Hole of Calcutta? To go to bed, not to wash, to keep the window well down, and the fire piled, if possible, up to furnace-heat, constitute the primitive elements of a good deal of amateur nursing.

If the owl hoots, or the dog howls at midnight, many country nurses will consider their case as hopeless, and prepare for the worst. A spider crawling over the patient's bed or person, *in the morning*, is in some parts of Germany, Scotland and England considered a fatal sign. *In the evening*, the same insect is lucky. The Banshee's call, the Death watch, and a variety of other popular nursing superstitions must have a truly disastrous effect on a nervous patient, who is supposed to be the object of their attention. It is impossible to touch upon alien or barbarous nursing superstitions, at any length, without becoming too discursive. Suffice it to say some of the imaginings that afflict the sick not far from centres of civilization are not many degrees above the method employed by some "Paumotesans" described by Mr. Stephenson in his essay on the "South Seas." These savages, acting on the instructions of a "whistling spirit" immersed their patient trustfully in scalding water, with the result, surprising to the Nurses, that he was gathered to his fathers.

In some places, it is usual for the amateur Nurse of a person stricken with disease, to insist on his partaking of what in health constitutes his favourite dish. The patient's present aversion is not considered.

Superstitions with regard to drugs are very curious. Some of us may have noticed that it is not unusual for our household servants to help themselves on occasion to any mixture or pill they may happen to come across—effervescing mixtures of any kind being most popular. A housemaid once perseveringly dosed herself with a shampooing mixture I kept in my bedroom. Noticing that a

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