

to despair when no woman was near, and there was no chance of getting home.

Again, said the speaker, these pioneers carry with them the whole honour and credit of England. The country to which they belong is appraised by the credit or discredit which they reflect upon it. No second-ratemen, still less wastrels, are wanted, but the very best. Therefore in sending them the conditions must be made as good as possible. Young men may not count the chances, but parental judgment does, and parental influence counts for much, and there will undoubtedly be less opposition to the acceptance of appointments abroad if parents know that nursing assistance will be forthcoming in case of illness.

Therefore in this Empire-building movement there is a double warfare. In the first rank stands the pioneer, the civil servant, the merchant, &c., and behind him another army engaged in fighting disease. The Colonial Nursing movement has a Christian and an Imperial claim on the sympathies of all. It unites all, it divides none; it has done wonders during its short existence, and it is very economically managed.

Sir M. Mitchell-Thomson, Bart., in seconding the adoption of the report, said that the Colonial Nursing Association discharged a duty owed by those at home to those of our fellow-subjects in small colonies not so well off as ourselves.

Sir Harry Johnston, G.C.M.G., said that in 1896 he spoke to the Foreign Office with all the emphasis at his command as to the importance of sending well-trained women as nurses to tropical Africa. Since this appeal had been listened to, quite half the terror of residence in tropical Africa had been removed. As doctors studied more and more the special diseases of this region, they pointed out the supreme importance of skilled care for the patients both night and day. They should never be left. In the prospectors' camps in Nyassaland years ago many deaths occurred not from disease, but from exhaustion consequent upon the lack of skilled attention. Now all this was changed, and in nearly all the large centres nurses were to be found. If, said the speaker, we are to continue to labour and to train the negro in these regions, means must be found whereby the mortality rate amongst white men can be made bearable. It can be reduced 75 per cent. by efficient nursing. There was a time when men in these countries thought women would be an encumbrance; now the opposite opinion prevailed. The presence of white women providing cultivated and refined society for colonists was more needed than anything, and women had done their part in making the development of the country a notable success. Not a few of the men who prior to 1896 had decided they could stand tropical Africa no longer have stood it for seven more years. One unlooked-for development of the

influx of nurses had been that those sent out often married. It was a consummation devoutly to be wished. Where could the men find better wives? He hoped the number of nurses sent out, and of nurses marrying, would increase.

Sir Henry Burdett said he noticed that two-thirds of the nurses sent out nursed in Government hospitals, and only one-third as private nurses. He would like to see these proportions reversed. This is all very well as a platform theory, but in practice we should say the proportion of private nurses is ample. In colonies where there is only a small staff of nurses it is desirable on many grounds that the sick, when possible, should be moved into hospital; the work of the nurses can be utilised to the best advantage, and it is very preferable from the point of convenience and fitness that bachelors, who form a large part of colonial communities, should be so nursed rather than in their own quarters, where the work is done under many difficulties, and where there is usually no accommodation for the nurse. We should say the Colonial Nursing Society has acted wisely in placing the larger proportion of its nurses in hospitals.

Mr. Seymour Fort, from Rhodesia, described the extraordinary sense of luxury and relief he experienced when received into a hospital to be cared for and looked after.

Sir R. Moor, who moved the election of officers, expressed the opinion that, so far as West Africa was concerned, the conditions of service were not sufficiently good. It was a duty to look after those who engage to serve you, and the conditions should be such as would attract the best. The best were required in West Africa.

Major Ross, C.M.G., in seconding the motion, said that the nurses who had entered the Liverpool School of Tropical Medicine for instruction had shown such interest in the work that they now went through the full course of instruction given to medical men. It was an absolute necessity that they should receive instruction if the country was to do its duty. He thought also that the work of women in tropical countries might usefully be extended along novel lines—namely, as missionaries of sanitation. In this they could play an important part. A large part of sanitation consisted in convincing people of the laws of health, and women charged with this mission would find their way into many houses where men would not be admitted.—The meeting terminated with the usual votes of thanks.

---

Miss C. H. Keer, Principal Matron in Queen Alexandra's Imperial Military Nursing Service, who has been appointed to the position of Chief Nursing Officer in the Military Nursing Service in South Africa, has left England to take up her work in that capacity.

[previous page](#)

[next page](#)