

much may be done to combat this terrible disease in its earlier stages.

(c) In infectious illnesses Nurse can show, by precept and example, how to prevent their spread; in consumption, the need of a separate room, even at the risk of some overcrowding to the rest of the family, disinfection of sputum, and so on; to prevent small-pox she can explain the facts and give the figures in favour of vaccination; she can advise in which illnesses to prevent contact and how to do it, in which promptly to seek for the causes; she can tell of the importance of getting milk from a clean and well-kept dairy, and of scalding it when got, and keeping it covered. There is, in short, no end to the preventive teaching she may give on these lines. In the remote parts of Scotland and Ireland much superstitious terror exists of infection, and it will lie with trained and intelligent nurses to help to remove this.

(d) For the mother after confinement, the patient herself and the neighbour who helps with the housework realise what stress the nurse lays on the necessity of the mother having a long enough rest, the bad economy of making a too early effort to get up and work, also the necessity of her having as good food as the family resources can allow. Attention to these points leads to earlier and more permanent health, a matter of infinite importance not only to the mother herself but to her family.

(e) For the new-born infant, Nurse accentuates the importance of attention to the eyes—a great percentage of blindness is traceable to early neglect—the right kind, amount, and times of food; and she explains and enforces that the infant must not have a share of whatever is going, including whisky; she can also give useful hints on clothing, and in a small, perhaps overcrowded house, she should advise that the infant should sleep in a cot, made say of a box or basket, and not on the mother's arm, which entails risk of overlaying. Under this heading alone district nurses should gradually do much to decrease infant mortality.

(f) For young children, Nurse can explain also why the overcrowding at night is so bad, predisposing children to rickets and other ailments, and that with two rooms all should not sleep in one. She can, by explaining in simple language the nature and uses of the skin, and how choked pores throw more work on the lungs, kidneys, &c., show that the usual weekly bath is not enough for children; she can give good reasons for advising high dresses and long sleeves, care of the teeth, &c.

(g) Nurse has many an opportunity of teaching and improving cooking, not only for the sick, but for the other members of the family. Perhaps no ailment is so universal and so preventable among the poor as indigestion in its many forms, and the number of puny, ill-fed children is an evidence of poor food and bad cooking. A good work is indeed done if the mothers are made to understand

what a terrible enemy to nerves and digestion is badly-prepared tea. Nurse can show that good cooking is not only cheaper than bad cooking, but also more nutritious and pleasant. "To preach porridge and the pulses," as the late Sir Robert Christison exhorted, to show how to prepare a few well-cooked, wholesome, and varied dishes, including broth and pea soup, to prove that a child's craving for sweets is better satisfied by a wholesome suet dumpling with treacle than by the bad sweets and pastry so many pennies are wasted upon, surely these are lessons on which the district nurse may well expend a little time, as their result is effectively to raise the standard of life.

I have only slightly illustrated the innumerable ways in which a district nurse can raise the standard of life in the families among whom she works. The knowledge of all these matters, and how to teach them, does not come to the nurse herself by intuition. Queen's Nurses, the district nurses with whom I have the honour to be connected, have a long and arduous training, not only the usual hospital course in which they learn how to nurse, but during training in the district home they learn monthly nursing, gynæcology, fevers and diets, hygiene, cookery, and, best of all, they learn under the superintendent and the district superintendent the daily lesson of how to apply and make good use of all the knowledge, theoretical and practical, which they have gained. They learn to look at things from more than one point of view; good air and proper food, the essentials of health, are not always to be found, and there is no use of talking of what ought to be, if it cannot be. The nurse must try to improve what is there, and to explain in simple popular language the "reasons-why" of things. Above all, each nurse learns that there is need for infinite tact and patience—it must be line upon line, precept upon precept, but she has her reward. It is difficult to overestimate the influence for good of the district nurse, going in and out among the people day by day, and year by year. The steadily increasing army of blue-robed Queen's Nurses wage a never-ceasing war against disease and suffering. In time, with adequate money forthcoming, there will surely be such a health missionary in every parish throughout Great Britain and Ireland.

The Pontypool Hospital authorities have lost a source of income by the death of Prince, a little Welsh terrier, owned by Mr. J. Victory, who collected hundreds of pennies for the Pontypool Hospital. He had been so trained that, if anyone in the same room dropped a penny on the floor, he would at once seize it and take it to his master. Wild horses would not induce him to give up the coin to anyone else. Upon the hospital box being held to him, however, he would readily drop the coin into the slit, and beg for more.

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