

Royal British Nurses' Association.

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DIFFICULT CHILDREN.

SOME POINTS FOR NURSES ENGAGED IN TEACHING THE HYGIENE OF CHILDHOOD.

The nature of a child cannot be altered, but we can direct its habits and development by training and environment. The child who has not had any nervous trouble or shock, or who has not been made to exert self-control beyond its natural powers, between the ages of two and five, or one, again, who has not been made to suffer by undue repression, will probably never have any nervous trouble in after life, provided there is no hereditary taint. One of the cruelties done to small children is making them sit still; such repression has a very bad effect, it demands too much mental energy and causes fatigue and irritability, if persisted in. The best method for keeping a child quiet is to give it something interesting and amusing to do; attract it, first, by giving it something to look at; this will get the limbs still, arresting movement without effort of will. Delicate children are also best employed by some simple game or work. The Montessori system, for instance, sharpens the faculties by methods which teach the child to compare and judge by weight, weight, sound, texture, colour and rhythm. In the education of children regularity must be our keynote, bathing, dressing and feeding carried out by the clock. All children have the same emotions as adults—love, jealousy, hatred and fear—and a person may receive as deep an impression and have as strong impulses during childhood as in later life, though we often assume the contrary. We must remember that a child, capable of loving, can also be jealous and, if there is cause, his or her health may suffer or lifelong habits of jealousy or hatred may ensue; there are cases on record where children have even taken the lives of others when jealous. With the best intentions and careful attention the health of delicate and nervous children may cause great trouble and anxiety; a small girl of five years worried so much about the advent of the little brother that she became very ill and her life was despaired of. She could only sleep when taken out in a tramcar by her mother, probably then because they got back to their former relationship and left the baby brother at home. This, however, could not continue, as the child was gradually fading away and the doctor suggested she should go to a children's hospital for a time; this was done, and she made a speedy recovery in new surroundings.

The whole household centres too much on the only child, and if a child is of a negative disposition—I mean, if he is one of those children who always feel compelled to do exactly the opposite of what is required, there is bound to be trouble; the atmosphere is altogether too tense and his characteristic reaction is often due to pure nervousness.

Some adults fuss and worry to such an extent that it reacts on the children. A short time ago a mother asked our advice, remarking that she had punished her daughter

daily for some naughty action; it was only too obvious that her method was not successful. To be successful we must remember that each individual child requires individual treatment. We shall find children who upset all our plans and theories—then we have to try something else; one finds this particularly in the case of sick children, they will only take food in a certain way, or out of a certain vessel. The main thing is to see that they do take it, and we must pander to the fancies of a sick child. The first lesson a child has to learn is to obey—individuality and self-control are what we all want, but often people stamp out the former in achieving the latter—independence is essential to the happy child.

It is useless to try to train a child whose health is not sound on the same lines as really healthy children; those who continually refuse their food drive mothers and nurses to distraction, yet this may be only one symptom of the backward child; it may not be able to feed itself until a late age, maybe slow at learning to dress and so on. We should play little games in dressing and feeding, and devote ourselves to general improvement, not concentrating too much on one thing.

Let the nervous sensitive child mix with other children. We all have fear in some shape or form, and the comparative smallness of children should be considered; when they wildly exaggerate we should remember how large we appear to the child, and that animals also seem huge—cats being described as tigers, and dogs as lions. It is very wrong to put these nervous children to bed in the dark; if they are afraid they should have a night light or a light on the landing, the door left open and gradually closed a little bit each night.

If a child has been badly frightened we cannot undo the bad effect, we can only get his confidence and help to allay his fears. We must all be children for the time being to really understand and cope with the situation. A well-managed child is a well-balanced adult, and a child who has been taught regularity in all things will become a methodical and systematic person later on. The links of the chain are all built up bit by bit, and the saying that a chain is no stronger than its weakest link is peculiarly adaptable to individuals, the weak link will give way some time or other; such a weak link may frequently be the mental process recalling some unfortunate experience of early life.

K. ATHERTON EARP.

THE INTERNATIONAL COUNCIL AT HELSINGFORS.

At a recent meeting of the executive committee it was decided to send a representative to the meeting of the International Council of Nurses which takes place at Helsingfors next July. The journey is a very costly one, and, while it is most important that the Royal British Nurses' Association should not be without its representative, it is felt to be unfair that any individual member should be called upon to bear the whole of the cost of a journey undertaken en-

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