

graphs and the reporters; the great concourses of excited and bewildered children. Princess Margaret opened hospitals and schools and constantly pegged away at a long list of official duties with such charm, graciousness and patience and with such dignity and a sense of duty and of humour, and with gaiety and joy that the peoples of the West Indies simply adored her.

Always she was quite charming. In the blistering heat of the sun she appeared cool and completely at ease. To those people of the far Islands of Trinidad, Grenada, Antigua, Barbados, Jamaica and Nassau she was almost a legendary figure suddenly become real in their very midst. They found her to be glowingly beautiful and young, vivacious and gay; Royal and human; tender and sweet. Always exquisitely gowned she was the personification of a great and Royal Lady of State and a true Princess as she moved so graciously and joyously among the peoples of the West Indies. She spontaneously called forth a great and mighty surge of loyalty and love to the British Throne, and a feeling of independent pride in being members of so glorious a Commonwealth. She was their very own Princess Margaret and the day they saw her will be the greatest day of their lives.

In the short but happy days the Princess spent in the royal yacht *Britannia*, as she ploughed her majestic way in those wondrous seas between the islands, we hope her Royal Highness found the rest she must have needed. Often she had to forgo her great delight in cool, sea bathing because of treacherous currents and dangerous seas. Some of the few days of relaxation arranged ashore for her were spoilt by tropical storms. But Princess Margaret never showed her disappointment, and she enjoyed to the full the few leisure hours that came her way.

And now all the triumphs and the glory lay behind her. Faithfully she has carried out her Royal and onerous duties and she has magnificently succeeded. She has proved herself to be a worthy member of our Royal House and an able and enchanting Ambassador, and we cannot adequately show her our appreciation. But on the day the City of London gives her an official welcome home and a luncheon, to thank her on our behalf, we shall join the throng of Londoners to cheer her on her way and shout our own, "God bless and thank you, Princess Margaret."

G. M. H.

G. M. H. has been thanked by Miss Mary M. Roberts, R.N., the author of "American Nursing History and Interpretation," for the review of the work which appeared in our issue for January last. Miss Roberts says, "You have been most generous! I am especially happy to know that you consider my treatment of 'world nursing politics' correct and unbiassed. It is deeply rewarding to know that, from your vantage point in the cradle of modern nursing, I achieved one of my major objectives."

A Task before the World Health Organisation.

Making a Persian Carpet.

By Dr. G. Gramiccia, WHO Malariologist.

AT SOME DISTANCE from a village in one of the countries of the Middle East, a semi-desert land, I met a small boy, not older than five. He was walking slowly, apparently without direction, and crying forlornly. A dirty bandage covered his forehead down to the eyes, and he was keeping his hands pressed to his brows as if to try to relieve a tormenting pain. The boy had trachoma in a severe form; the inside of his eyelids was packed with granulations and a number of tiny red blood vessels was forming a sort of repulsive curtain down the upper half of his eyeballs. I don't think he even saw where he was walking: he did not seem to care.

A young boy crying for a real sorrow is always touching; but in this case the solitude of his surroundings and, even more, the solitude of his pain were tragic. When I visited the village, I understood why that boy had to carry his pain alone: 60 per cent. of the inhabitants had trachoma; and their poverty was as striking as their diseases. They did not even react enough to complain. They were past complaining, had been for ages perhaps.

Afterwards, with my colleagues, I visited many other villages in the same vast area, and we found a similar picture almost everywhere. We saw an old woman with typhus sitting in the shade of a mud wall in one of the narrow streets of her village—one place to stay was as good as another, in her condition. Some villages stricken with malaria had been severely damaged by last winter's rains: several of the mud roofs had collapsed, and the houses had been left unrepaired for seven months. A number of the children were suffering from vitamin deficiencies, they usually ate bread and very little else. Fifty-three per cent. of the babies were dead within one year from birth. Most of the villagers were opium addicts, and I did not feel like blaming them.

Water was scarce almost everywhere, sometimes critically scarce, yet an ancestral tradition prescribed, perhaps out of piety, that the bodies of the dead be washed at the very source of the meagre water supply.

Poverty, ignorance and diseases are the three connecting links of this tragic situation. These people possess nothing, and can retain only one-fifth of the produce of the small piece of land that they manage to cultivate.

This is not a story, of course; this is only direct observation. Faced with problems of such magnitude, even people who are most determined to do something to help experience a feeling of impotence. Where can we start? How can one attack at one and the same time the three main problems, each of them equally important? Freedom from want, from ignorance and from disease are expressions that seem beyond attainment in this place, just where they are most needed.

One of my local friends told me: "For some villages, and also for some of the towns of my country the only way to solve their health problems would be to demolish them completely. Nothing short of that could solve the problems of sanitation, eliminate foci of infection, bad habits of living and of dying, too. Take trachoma, for instance: we can think of so many causes, scarcity of water, lack of soap, which many people cannot afford to buy, flies, infected dust, polluted ground, the veiling of women and their habit of rubbing their own eyes and the eyes of their babies with the same dirty corner of their veil, etc. The virulence of the infective foci is so intense that, if one does not control all possible sources at one and the same time, transmission of the disease will hardly diminish."

I wish to emphasise the point that there occurs a frequent reaction to situations of this kind, and that this reaction is

[previous page](#)

[next page](#)