

I was busy giving the medicines and taking the temperatures?" They had the greatest dislike to touching a patient. This, I think, they are getting over, but all the washing of the patients, rubbing them with liniment, giving of enemas, etc., they used to make the attendants do, who are in the position of ward-maids. In Ceylon, Nursing has not become the fashion, so we have but very poor material to work upon, but I think this will improve in time.

Among my patients are all sorts and conditions of men, women, and children, medical, surgical and obstetric cases, of different races, Tamil, Singhalese, Burgher, and European.

One of my women ought to be in an imbecile asylum, but I believe Ceylon does not possess such a thing. She sits all day with her head on one side, her eyes closed. If touched, she makes herself perfectly rigid. We have never been able to find out if she is blind, for if you try and open the eyelids she resists. She is harmless, and if you give her her food into her hand she will feed herself.

Then comes Naida, a boy of eight, who has no father or mother or belongings, but who supports himself by begging in the market. The Hospital he makes his headquarters, but when he gets tired of being here he goes off, and in about four days he is back. He was only out three days last time when he was brought back, and he looked as if he was going to die at once. Now he declares his intention of never leaving us. He goes by the name of the little old man.

The patients are most interesting. They are chiefly Singhalese and Tamil. Having two languages spoken, and neither of them your own, makes it difficult to master all the details of your cases, but the Burgher Nurses know a little of both languages. I am learning Tamil, and Sister Maud is learning Singhalese. Miss Higgins picks up a little of both.

I have a Tamil young man and a Singhalese, both about twenty and both paralysed, one from a tree falling on him, and the other from falling out of a tree. I began teaching both English, but the Tamil boy has outstripped the Singhalese, and the latter got tired. I have a Tamil pundit who comes to me three times a week and translates the English primer into Tamil, I then teach my boy and tell him what the Tamil translation is. He is most indefatigable, calls out for his book as soon as he sees me in the morning, and parts from it with regret at night, in fact, he would like to go on long after the lamps are lighted.

A baby I had of two years old will make the fortune of a circus, if it is discovered. It has no mother, and has learnt to console itself for want of loving care by rocking itself backwards and forwards. It takes off its little cloth, covers its head over, folds its little legs tailor fashion and its little arms under its abdomen, and then throws its head back until it touches the spine in the small of the back. The back is white from where the head has knocked it. Two things my baby loved, its dinner and me, but I fear I took the second place.

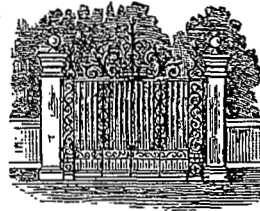
There is a Physician in charge of the Hospital. He is very kind, and gives us staunch support in everything. We have also a Singhalese House Surgeon. He speaks very good English, and is most kind-hearted and helpful to everybody.

S. C. McLAUGHLIN.

— Outside the Gates. —

WOMEN.

WOMEN AS SANITARIANS.



It is not customary to associate Harley Street with gardens, trees, and flowers. So that it was quite a pleasant revelation to those who received an invitation to a drawing-room meeting, held on May 29th, at Mrs. Scharlieb's, to pass from the bustle of the street and the traffic of medical-looking carriages, into the pretty garden which leads to her quiet rural-looking house. Mrs. Scharlieb is waiting on the stairs to give a cordial greeting to each visitor, and so strong and kind and gracious is her presence, that one is tempted to wonder if she is the prototype of "Dr. Janet of Harley Street."

The subject of the address to hear which a fairly large gathering of thoughtful-looking ladies is assembled, is entitled "The Claims of Sanitary Science on the attention of Women"; and these claims are put forth by Mrs. Clare Goslett, who has recently passed the Inspector's examination at the Sanitary Institute.

The charming countrified appearance of the house is added to by a decorative arrangement of blue corn-flowers and daisies, which form an artistic setting for numberless diagrams which are displayed as an object-lesson of the dangers of untrapped drains, and the hundred-and-one unseen horrors of an unhygienic home.

The mantel-piece supports a trave arrangement of leaden drain pipes, which might almost serve for a wall decoration in the absence of ancestral armour—so æsthetic is the design. Lady Priestley takes the chair, and in so doing, considering she has come straight from a sick-bed so that the audience might not be disappointed by her absence, shows what a real practical interest she takes in the hygienic teaching of women; for it is to emphasise the importance of this branch of education that the meeting is held.

Letters of regret for absence were read from the Countess de Hamel, and from Miss Primrose, the Principal of Bedford College. A telegram from Westfield College commended the scheme.

Mrs. Goslett opened her address by dwelling on the important part played by Sanitary Science in preventive medicine; and how a growth of knowledge in such subjects leads to "better development, better health, and a more remote death." It appeared to her that this Science had a strong claim as an advanced study for educated women. In these days of "sanitary restlessness" every little plumber calls himself a sanitary engineer; every laundress is "hygienic"; dressmakers go in for rational clothing, and she had even come across a sanitary chimney sweep. It was fashionable on taking a house to enquire "And how are the drains?" But in spite of all this, unhealthy homes abound. Dr. Vivian Poore says: "If we are ever to have better workmanship,

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