Of course it is a mistake when the old-fashioned wards are too long and contain too great a number of patients, but if they were sub-divided, so as to hold only twenty to thirty beds, I see no objection to them, except that of the large wall space to disinfect. This, however, is, I fear, an unanswerable one. The Hospitals here are so constantly crowded that to keep one ward to receive consecutively the patients of every other whilst it was cleaned and disinfected would be an impossibility, even if the funds for this cleansing were obtainable —which is more than doubtful.

Want of money is, I believe, nowhere more felt than in the Hospitals. Public interest is not brought to bear on them; they have been for so many generations mainly religious institutions, governed by the Church, that the ordinary public has very little conception of possessing any duty concerning them. They used to be rich, because dying people left such large legacies to them, but since all the changes regarding opere pie have been effected by the Government they have often lost the interest on these, and their incomes are almost universally reduced, whilst the number of patients augments with the increase of population.

It seems as if the only present hope of getting things on a better financial footing is to interest the general public in Hospitals, and so get voluntary subscriptions and donations to replace the old pious legacies, and supplement the Government grants.

People will give if they care about a thing ; to care about a thing, you must know about it ; to know about a thing, you must either see it, or hear about it. Ergo, to ultimately obtain the wherewithal to carry out reforms in Hospitals, it is necessary to immediately render them possible places to visit and to write about. So long as no one (except the ever-diminishing members of old pious societies) puts foot in Hospital wards, so long as accounts of receipts and expenditure are not open to the public, so long will the public refuse to occupy themselves with them, and so long will doctors and administrators remain handicapped by want of money-handicapped, though by no means unprogressing : the faculty take care to prevent that. In fact, in all that actually relates to therapeutics and surgery, young Italy can hold her own with any nation; so that the unbiased "man from Mars" would assuredly adjudge her surgeons and physicians the equals, and even sometimes the superiors, of their confreres of other nations! but woefully handicapped in much that regards hygiene, and in almost all that concerns the

comfort and refinements of Nursing. However, my immediate business lies within Professor R—'s wards, and will, I fear, prove quite hard enough to demand all my small capacities.

At the end of the male ward is a small enclosed space where the nun has her cupboards and table. Suora A—— is a youngish woman, slight and tall. She looks kind, but evidently felt my advent depressing. She would not speak unless I asked a thing point-blank, and then only in the briefest manner. The Professor merely said he had given me leave to frequent the wards, and requested her to help me in every way possible.

every way possible. Of course, I told her that I hoped I might be of some use. But it is not easy talking to a person who does not respond; so I followed the Chief to the woman's ward.

This is, unfortunately, a very small one; only thirteen beds for patients, the fourteenth being kept, unless urgently needed, for the *infermitive* to sleep in. It is not a hopeful prospect, only thirteen patients for a Suora, two official Nurses (*infermière inserviente*), myself, and two pupils to nurse! To day, not half the beds were filled; the Professor chooses cases from other Hospitals, or accepts any suitable ones that present themselves, but apparently both processes are slow. Only four patients have been obtained so far.

The Suora here is evidently a remarkable person. A much older woman than Suor A—, enormously stout, and very red in face; light eyes, with red eyebrows and lashes (hair one does not see). The face is very mobile, no word but "jolly" defining its occasional expression, though the lines of a hot temper are strongly marked, and stand out prominently when in repose.

Professor R—— told her that I was a Nurse-mistress (*infermiera maestra*) come to train pupils out of kindness; and I added, "With your help, Suora," when she smiled very pleasantly. He added that till I brought my own two pupils I

He added that till I brought my own two pupils I could show the present *infermière* various things, and I fancied she drew herself in at this, and feared it was a *faux pus* on his part. Of course she could only answer her chief by "Very well, sir." But I felt intuitively that she considered teaching to be her own distinct privilege (naturally enough), and as soon as he had left her discourse proved the truth of my impression.

She talked a great deal, saying she had nursed for thirty years, and in various Hospitals; that she undertook the clinique at the especial request of the Mother Superior; that she preferred greatly a male ward, even a large one, for there was really much less trouble. A female clinical ward was enough to drive one wild (far impassire). All the specimens, temperatures, diets, everything to supervise herself, even the smallest ward gave no peace, for all the responsibility was hers; it was she who had to give account of everything that went wrong, &c.

Of course, I could only agree and sympathise to the best of my ability. But it seemed rather an un-Nurse-like point of view to advance; and I could not help wondering if she adopted the *supposed* nunstandpoint, and gauged the virtue of work by its distastefulness.

I waited till 12, when the patients' dinner was fetched by one *infermiera*; I thought it wisest their to leave; one could only be in the way where there was so little possibility of work. But I looked in again in the afternoon (to get them accustomed to my constant presence), and made friends with the patients. One, a cancer case, is a Tuscan, and forgot for a little her pain and depression in talking over the charms of our dear Firenze—she still feels herself a stranger in Rome, though she has lived here 15 years.

The ward is quite pretty, with its altar and large picture at one end, a concentration of colour which contrasts well with the whiteness of everything else. Walls and ceiling white, beds and bed-tables painted white, patient's dressing gowns and pelerines, and *infirmitre's* big pinafores, all white. Only the dark slates over the beds (for the *infirmitere* to sign temperatures which the students afterwards chart), the pretty reddish pavement and the nun's black and grey uniform breaking the "harmony in white."

November Sth—I went to the Hospital at 7.30 this morning. It seemed well to show at once that I was a workwoman, not a *dilettante*. Suor M— was already in her ward, and great floor-washings were



