

drain work may be rendered ineffectual by mismanagement within the house.

Drains must be carefully cared for, else "the bad smells come," and bad housekeepers, under the circumstances, should be grateful when they do, because they tell us for certain that dirt is in the wrong place. It is of great importance that the drains from the sinks (kitchen specially), the w.c., and washhouse, should be properly trapped, *i.e.*, a good water seal in the bend of the pipe is kept, some 2 $\frac{3}{4}$  inches of clear water, so as to keep back the bad smells from the sewer. The value of such a water seal is lost by people who leave the drain to dry up, or throw down "bits" which quite prevent the connecting drain from doing its work. Now, if a district nurse has a knowledge of house drainage she can quietly explain to the wife and mother what evils she is guilty of as to the probable admission of diphtheria, typhoid, or scarlet fever to her house.

The water cistern is important. It should be covered with a lid, and the same cistern should not supply drinking and cooking water, as well as the w.c., washhouse or sink; it should not be placed in the w.c., because bad smelling air can be carried back to the cistern. It should be cleaned out every three months. But often in the homes of the poorer classes, *there is only one cistern*, even in these enlightened days; and if there is, the top of the cistern is generally used to store away brooms, brushes, dirty dusters, slop pails, so should there be a crack in the lid, in goes dust and broom hairs and bad gases. Now, no household articles, capable of holding dust, should be allowed near a cistern containing drinking water; there ought to be a ventilating shaft and a window, and the cistern should be so placed that, while easy to get at for cleaning purposes, it is *not* easy of access for children. A nurse who can teach the benefit of all this to her neighbours, has surely not wasted her time in doing so.

The proper places for larder and the storage of food are seldom thought about, and yet it is an important question in the health of the home. Food is best stored outside a house. This is often done by placing the food in the area, but in this case the area should be kept clean, white-washed, well lighted and ventilated, the floor should be of stone, and no standing water allowed, no drain should be inside. Generally the area where food is kept is the last place to be kept clean, and receives not only the water from the scrubbing, kitchen, and pantry, but is in a constant state of foul vapour and damp. Is it to be wondered at that food turns mouldy, and great waste ensues? Where the poor store their food it is terrible to think. Often in summer the w.c. is considered the coolest place. One of those cupboards with zinc lining and doors is about the best to use, for this can be kept outdoors. The w.c. is

a difficult question in our crowded cities among the poor classes. Its condition is by no means a bad test as to the management of the house. Generally the dirt is hopeless, utensil unclean, holding no water, while the window is rarely or never opened. The water supply may be good, and evils result from pure ignorance, for the closet should be thoroughly flushed out once a week and kept in a cleanly state, and every care taken of ventilation, and that a good water seal is always standing; this ensures that no sewer smells get into the house.

*The question of dustbins has its interests.* There should be a close fitting lid—the zinc canisters are the best, being easy to empty. The mischief that comes from a badly managed dustbin is easily prevented; it's not the ashes *but* the refuse, vegetables and food which are thrown in. This mischief is bad enough, but is intensified by the addition of stale soup and milk. Out of this mixture comes carbonic acid, sulphuretted hydrogen, and ammonia. A knowledge of dustbin sanitation will enable a nurse to teach the benefit to each house in particular and to the community in general, that everything injurious, and therefore that can putrefy, should be burnt in the kitchen fire *daily*. No smell will be made, if the fire is a *glowing* one, and the refuse little by little is placed in the centre of the fire. In infectious cases, she should teach that no food, tea leaves, dust or rags should be cast in the dustbin.

*Infection and Disinfection.*—A trained nurse ought to have a knowledge of the sanitary law on these points. She would find it a sure vantage ground of authority to speak from a knowledge of these points. Knowledge is power in everything, and specially in sanitary matters, because it can be used practically. Civilised life is no easy affair, and the health of each person is by no means a matter entirely in his own hands. He belongs to a community, and is subjected to the carelessness of his neighbour. So the law steps in and forbids certain acts and nuisances; as a person may catch an infectious disease through the exposure of another suffering therefrom. Of course, prejudice and ignorance are bad enemies to sanitation, but a knowledge in such legal points will greatly advance a nurse's work, so she will be able to make it fully understood that certain things must be done by law, and that the people concerned have no choice.

Take the case of a bad epidemic of measles. A nurse who knows of the existence of the Isolation Hospitals' Act, 1893, the Infectious Disease Notification Act, 1889, and the Infectious Disease Prevention Act, 1890, can bring far more influence to bear on the argument, because she knows the law and has fully grasped the benefit these Acts are intended to confer on the whole community.

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