

they thought of means of giving relief that would not have occurred to us men. I suppose they are the only women who have been really 'at the front' in this war."

It is just because men cannot do women's work that we desire to see female nurses appointed to the field hospitals.

The rumour that Miss Tarr, who went out with Mr. Treves, has died of dysentery in South Africa, is, happily, contradicted. Miss Tarr has been seriously ill and in hospital at Maritzburg, but the last news states that she was improving steadily, and we may hope by now that she is convalescent.

Those amongst us who have nurse friends in the South African beleaguered cities learn with grief of their inevitable suffering. For ourselves, we have many in Kimberley, and the latest information from the *Central News* correspondent at Cape Town is sad indeed. Despatches of January 13th show that the people are suffering terrible privations, and that the women and children refuse as food the horse-flesh served out daily.

The official health report of Kimberley shows that the death-rate of the white inhabitants for December was 60 per 1,000, and of the natives 138.3 per 1,000. The infantile death-rate, of children under a year, reached the remarkable figure of 671.1 per 1,000 white, and 912.7 per 1,000 coloured. The population of Kimberley is estimated at 14,000 whites and 19,000 natives, including those in the compound's convict station and gaol. The cause of the high infantile mortality is the want of milk, fresh vegetables, and meat. Typhoid fever has been exceptionally prevalent during the month.

For the sake of the sick, it is some consolation to know that a staff of splendid nurses are amongst those shut up in Kimberley, and that thus, no lives which could possibly be saved will be lost. What graphic stories some of them will have to tell when the happy day of release comes.

All the official reports from South Africa speak in the highest terms of the Medical Department, and, indeed, we might be quite sure that the duties of medical men and stretcher-bearers would be performed as brave men and true perform their duties; but, unfortunately, under our present organization at the War Office, medical men and orderlies are empowered with responsibilities in relation to the sick and wounded for which they have not been trained, and in which, therefore, they are bound to fail.

We allude, of course, to placing medical men in the position of Superintendents of Nursing—posts to which they are not appointed in well-organized civil hospitals—and expecting from almost entirely untrained soldiers the skilled services of thoroughly qualified experienced women nurses.

Already echoes of disorganization are being wafted home, and in a letter from Sir William MacCormac, quoted by "The Major" in *To-Day*, he says there appears to be excessive friction between the medical officers and the female nurses, and some of the former go so far as to maintain that they would prefer the assistance of a male hospital orderly to the most highly-trained and skilful lady nurse.

Now this is a very bold pronouncement, and shows the rift within the lute; but the public must see to it that such medical officers do not have their way, and make it impossible for our soldiers to have the services of "highly-trained and skilful nurses." What we nurses aim at is that such a class of attendant shall be largely increased, rather than decreased, by medical officers, who, we must remember, are all powerful at the front, the nurses having no Chief Nurse to whom they can appeal for help or advice at the Cape.

"GO AS YOU PLEASE."

It is now some weeks since we drew attention to the fact that there are at the Cape many well trained and suitable nurses whose services might advantageously be requisitioned in the nursing of the sick and wounded. We, therefore, note with pleasure, in the *Morning Post*, an excellent article, from a colonial standpoint, which we re-publish, and which entirely endorses this view. It seems the very irony of fate that nurses from Great Britain, from America, Canada, and Australia, should be despatched to South Africa while those on the spot are prohibited from taking their just share in nursing the men wounded in their own Colony. Imagine a war in Canada. Would Canadian nurses be set aside for newcomers from other continents? The suggestion is ridiculous. The grotesqueness of the situation is increased when we consider that, so far, Cape Colony is the only country in the world in which State Registration of trained nurses has been established by Act of Parliament, and in consequence some uniformity of training, and professional control accomplished, and the public afforded the opportunity of distinguishing between the thoroughly trained nurse and her counterfeit. What is needed is the establishment at once of a Nursing Department in conjunction with the Army

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