

was filled with first-class passengers; but it is not the privilege only of the first-class to be sick, there is the second-class and the crew to be thought about.

How, then, is proper care of the sick at sea to be secured?

Public opinion must be aroused, and who more fitted to arouse that public spirit than the British Matrons, and pressure must be brought to bear on the Government to pass a law that all ships carrying passengers should set aside a certain portion of passenger space on the upper deck when possible, to be used as a hospital, and that the staff should consist of at least a doctor and a trained male or female nurse. The mail steamers all carry a doctor, but later on I will explain why a trained nurse is also required. Once the carrying of such accommodation is made compulsory, ship-owners will have no cause to grumble, as all ship-owners would have to set aside a certain space according to the number of passengers their ships were licensed to carry. That I am not proposing a wild cat scheme is proved by the fact that the French Government passed a law somewhat to the same effect as far back as 1886, which reads as follows:—

*Translation of the Ministerial Circular of
15th May, 1886.*

“If the ship is only to carry healthy passengers, there ought to be provided an isolated place capable of holding a number of invalids equal to 2/100 of the number of healthy passengers.

In the case where the ship has to receive invalids, a similar place must be installed. It will serve to isolate the sick attacked with contagious diseases. This locality should be calculated for a number of invalids equal to 4/100 at least of the sick.

Those confined to their berths should never be lodged below the first between decks. On board French ships going to warm climates the Infirmary is installed in the first between decks towards the fore part of the ship. It is divided into two distinct compartments—one for the women, the other for the men. Each compartment possesses a bath with douche and a W.C., and ought to be well ventilated, and have, in addition, a port hole of 60 cms. by 60 cms. called a funeral port hole, permitting, in case of death, to pass the corpse through the port hole.

The berths are in 2 rows, one above the other; each berth has the following dimensions—0 m. 60 cms. in width, and 1 m. 85 cms. in length (interior), and so placed that the attendants can get all round the sick person.

The berths are placed in rows of two at the most, the passages between the rows are at least

1 metre wide. Upon the upper deck and in the fore part of the ship is the surgical operating room. This place must be large and very light. A table of 1 m. in width by 2 mtrs. in length is placed in the centre of this room, so that the doctors can move freely round whilst operating.”

The above circular does not quite meet the case we have in hand, but I mention it to show that other Governments have moved in the matter.

Therefore, I say my scheme is possible. What France can do for her sick at sea England also can do. I will now give you some of the reasons why, in my opinion, so many people die on the West coast of Africa. My remarks will apply equally to the Government employé, the trader, and the missionary.

First and foremost, the climate is, without doubt, about the worst, if not the very worst, for a white man to live in, in the wide world.

Secondly, I am inclined to think that neither the Government, the merchant, or the mission society, are as careful or particular in their selection of the people they send out as they might be.

Thirdly, in the case of the missionaries and some Government employés whose salary, especially the former, is absolutely inadequate to provide them with sufficient good food to keep them in good health; and under this head come also some of the clerks of the mercantile houses, when they are paid a salary out of which they have to feed themselves, the juniors especially are apt not to lay out their money quite as wisely as they might.

Fourthly, the art of cooking is very poorly understood by 9/10ths of the so-called cooks one meets with in Western Africa. Though it may seem absurd for me to say it, I am firmly convinced that there is, if anything, as great, if not greater, need of a school to teach cooking in the various colonies of West Africa, than there is need of the school for the study of tropical diseases.

Fifthly, many invalids ordered home die within a few hours of their being put on board the homeward bound steamer from sheer want of attention, or they die during the time when the steamer meets the strong trade winds between the African coast and the Canary Islands; the sudden change of temperature from an intensely warm and damp atmosphere to a strong, cold, and at times a dry atmosphere, often has a fatal effect. This danger is well known to all travellers who have made the voyage home from Western Africa, and I venture to say that, if the steamers were supplied with properly arranged hospital cabins and trained attendants, much could be done to minimise this risk, as the doctor would

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