

## Medicine and Nursing in the South African War.

### THE ROYAL COMMISSION.

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EVIDENCE OF LIEUTENANT-COLONEL E. M. WILSON,  
C.B., C.M.G., D.S.O.

Lieutenant-Colonel Wilson, in charge of the subordinate male *personnel* of the Royal Army Medical Corps, gave evidence on four points—establishment, additional men for South Africa, additional men for home hospitals, and men not expected to be well trained.

#### ESTABLISHMENT.

The witness said the R.A.M.C. had never estimated for additional non-commissioned officers and men in view of war. They asked every year for the number of men required for the hospitals where the Army Medical Corps were employed. No account of the possibility of expansion was taken in the estimate. A certain number of hospital orderlies passed each year into the Army Reserve. The authorised establishment for the whole corps for the year in which war commenced was 3,045, and there were practically about 1,000 Reservists. This provision was exclusive of India, where the nursing in military hospitals was done entirely by Indian officials and Indian nurses.

Colonel Wilson described the organisation of the R.A.M.C. required for service with an Army Corps, including ten field hospitals and six bearer companies, base hospitals and stationary hospitals along the line of communications. The most essential thing was to estimate the probable number of sick to be provided for in any given climate. The term field hospital was rather a misnomer, as such a hospital had no beds, and moved with the brigade. The sick were really treated in the hospitals along the line of communications at the base. The percentage of sick allowed for in South Africa was 10 per cent. The same percentage would be required in a European war.

#### ADDITIONAL MEN FOR SOUTH AFRICA.

In South Africa the total force engaged in March, 1900, was about 207,000. For this number there were 800 medical officers, 6,000 hospital subordinates, and 800 nurses; that would be about 4 per cent. The men employed were not all Royal Army Medical Corps men; probably 4,000 out of the total of 6,000 belonged to the corps; the balance was made up from local corps, such as the Imperial Bearer Corps, the Imperial Hospital Corps, the Natal Volunteer Ambulance Corps, and the Cape Medical Staff Corps. The wastage from the 4,000 which the R.A.M.C. started with gradually settled down to about 100 men a month. The St. John's Ambulance Brigade supplied at different times 2,300 men, a large number of whom were engaged under a special contract.

Afterwards they enlisted men under a special Army Order as medical subordinates. In reply to a question by the Commission, "They had no training, had they?" the witness replied: "They had had no training in nursing, but I should like to be allowed to mention to the Commission that it is quite impossible, when you are suddenly required to send a large number of men to South Africa, to expect that they should all be trained in nursing duties. The number of men in the United Kingdom at any one time who are competent trained nurses is very small, and they are, of course, employed in the asylums, and as valets to invalid gentlemen, and in large hospitals. We were, therefore, obliged to take men like the St. John's Ambulance Brigade men, who have had training in first aid to the wounded, and stretcher drill, and ambulance work, and the Volunteers of the Royal Army Medical Corps, who have also had the same—they do their training. But they are not competent nurses to a sick man with typhoid fever until they have learnt." It had not occurred to the Department, before the war broke out, that they would have to draw upon those sources.

The evidence of the witness proved that while Army organisation as a whole is considered with a view to war, that of the Army Medical Department was really organised for peace purposes and with no view to war.

When the estimates are submitted year after year, there is always a tendency to dispense with what appears to be the least important, and, as female nursing was known to be the best, perhaps too much reliance had been placed on that, and that might have been the reason why they were unable to obtain an increased number to the *personnel* of the Army Medical Corps.

#### ADDITIONAL MEN FOR HOME HOSPITALS.

The witness described schemes now under consideration for increasing the subordinate *personnel* of the Corps at home, and expressed the opinion that the Department was profiting very greatly from the lessons of the war.

#### MEN NOT EXPECTED TO BE WELL TRAINED.

Under this heading the witness reiterated his statement that trained male nurses were not available for recruiting purposes. The training of the men of the R.A.M.C. on the normal establishment was now being increased, and it was intended to select the best and make them practically a nursing section, which should do nothing but nursing. This suggestion came from the Nursing Board [also from the Matrons' Council.—Ed.] and was being carried out.

The third-class orderly did very little but the ordinary ward work under the Sister. When a man had become a good nurse he was posted to a hospital where there were no Nursing Sisters. The large majority of military hospitals were small hos-

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