

be confined; and are we to take it for granted that these differences accurately correspond with the varying infantile death-rates of the several Workhouses? I cannot help thinking that the L.G.B. statisticians know better than that.

It is, indeed, an interesting fact that some of the Workhouse nurseries (including some dealing with the poorest slums of London and other large towns), have, with all the terrible "pre-natal and maternal conditions," actually a lower infantile mortality than prevails in the general population. I feel that, by giving in the Minority Report only the average for the whole, we failed to do proper justice to these excellent Unions, which have overcome so many difficulties; and at the same time we understated our case. Why is it that such Unions (to take only some of the good cases) as Stepney, Camberwell, Marylebone, St. George's in the East, and St. George's, Hanover Square, in the Metropolis, or Ashton-under-Lyne, Stockport, and Prescott, in the manufacturing districts, can all show infantile death-rates comparable with those of the best maternity hospitals, and considerably lower than those of the general population, whilst other Unions of the Metropolis, not poorer than Stepney or St. George's in the East, and Unions in provincial towns having populations closely resembling those of the industrial towns mentioned, have infantile death-rates six, eight, and ten times as great? If the adverse influence of the "pre-natal and maternal conditions" has been overcome in some Unions, how is it that other Workhouse nurseries actually in the same town, or dealing with quite similar populations, kill off their babies at ten times the rate, and have been allowed to do so, year after year, without criticism or rebuke? Unhappily, the "whitewashing" Memorandum now published will encourage these bad Unions in their self-complacency.

To my untutored mind—I ask any mother whether I am not right in this—the following facts (none of which are refuted or denied) have, at least, something to do with it.

1. In some Workhouse nurseries *the babies never get into the open air* from the time they are born until they die or leave at three or four or five. This fact seems incredible, but the L.G.B. does not deny it. In fact, it sanctions placing the nursery on a fourth storey, without even balconies, and does not even suggest any means by which thirty or forty infants can be carried down four flights of stone steps for the daily airings which the doctor in a private household prescribes.

2. Whilst the nursing staff is slowly improving, in most nurseries of general mixed Workhouses the babies are still handled, in the main, by pauper women (this not being yet forbidden by the L.G.B.), many of them feeble-minded, and occasionally even imbecile.

3. In some Workhouse nurseries there is not even one trained nurse in charge (this not yet being required by regulation).

4. There is no "quarantine" of newcomers; a perpetual stream of infants from 0 to 4 pours in from the worst home conditions without a proba-

tion ward, straight into the nursery. No wonder that measles and whooping cough are "troublesome"!

I am, etc.,

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HOSPITAL GHOSTS.

To the Editor of the "British Journal of Nursing."

DEAR MADAM,—I once worked in an infirmary where a ghost was seen, but I fear no one will believe my story. I had not been many months in the institution before the Matron placed me on night duty, and between the senior nurse and myself we had to look after seventy patients in several wards. One patient, a man of superior education, was warded suffering from paralysis, and was slowly dying. He had no friends, and was very reticent. This distressed me very much, and I longed for some one to come and see him and cheer him up. Once I asked him if I could write to any friend for him, and he replied: "I have only one friend; she will come if she is alive. Her name is Nell." "If I have her full name and address I will write at once," I reply. "No doubt she is dead and buried long since," he said, and turned away. A few weeks later I was hurrying out of the kitchen with a hot bottle when, to my surprise, I saw a little white rough-haired dog creeping noiselessly down the ward. I was surprised as the ward door was closed, and stood still to watch this midnight visitor. When it came opposite bed 19, where the paralytic lay, it stopped, quietly jumped on to the coverlet, and licked his hand. He was asleep for a wonder, and did not wake, and when I reached the bed the dog was gone. High and low I hunted, peeping under every bed, but it was nowhere to be seen. This poor patient slept but little, and at dawn I often gave him a drink of hot milk. That morning I found him smiling. "I have had a happy dream," he said. "The only real friend I ever had paid me a visit. She is waiting for me in old Charon's boat." "The waters of Styx wash white," I said. There was no more to be said. How is that to be explained?

ALCITHOE.

Comments and Replies.

Nurse Peters.—Inventions by trained nurses will be on view at the Nursing Exhibition at the Gaxton Hall during the International Nursing Congress from July 20th to 23rd. Why not submit your appliance to the Organising Committee (431, Oxford Street, London, W.), and show it there if accepted.

Certificated Nurse.—We should certainly advise you to obtain experience in infectious nursing. Every private nurse should have the knowledge which will enable her to nurse the ordinary infectious diseases, or her sphere of work is considerably restricted.

OUR PUZZLE COMPETITION.

Rules for competing for the Pictorial Puzzle Prize will be found on Advertisement page xii.

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