

officers of health were the only people who gave much consideration to the question. In 1901 the infantile mortality rate was 154 per thousand, in 1909 it was 109 per thousand. It must not be supposed that this represented a striving against natural facts, or the keeping alive of babies who would otherwise die, the progress made in combatting infantile mortality coincided with our understanding of the right methods to pursue. The movement began in France under Professor Budin. Any method which ignored the fact that nature provided mothers for the making and preserving of babies was inadequate. To be effective in regard to the infants work must include the preceding generation. This was what the School for Mothers was doing. Another important point was to get the babies born of the right fathers and mothers, and he was with the School entirely in its policy of giving instruction in the choice of wives and husbands; infantile mortality would never be prevented until the marriage of unfits was prevented. We were confronted with a falling birth-rate, and it was certain that this would continue. The obvious counteracting influence was to let the right babies be born, and to take care of them when born. If a larger proportion of babies survived this would obviously be equal to a higher birth-rate. It was a matter of Imperial importance. The decay of Rome and Babylon followed the decline of the birth-rate. We heard much of conscription in these days, but, if conscription were enforced, vast numbers would be rejected because they were not fit to serve. Real politics were the domestic ones, for life begins at home.

Miss Susan Lawrence, L.C.C., said that when children came under medical inspection at school age, it was often too late to remedy preventable evils. The London County Council had, for instance, several schools for the blind which were costly, and from which the children could not be turned out capable of self-support. An inquiry into the cause showed that many were blind as a result of infantile ophthalmia, a "disease which depends on nursing."

We conclude Miss Lawrence intended to convey that good nursing can do much to minimise the disease when present, but for the causes she must go further back, and in Dr. Saleeby's words "get the children born of the right fathers and mothers." Only so will the disease be eradicated. The theory of the survival of the fittest, of which we often heard, was, she said, crude and untenable. Further adverse conditions in the first year of existence affected children in after life.

The opening of the New Home for nurses engaged by the Queen Victoria Nursing Association, at the junction of Glossop Road and Houndfield Road, Sheffield, was preceded by an At Home in the Town Hall, at which little Lady Elfrida Fitzwilliam officiated instead of her mother, Countess Fitzwilliam, the Lady Mayoress.

Alderman Franklin, the hon. treasurer, mentioned that the Association was established in 1903 with the object of providing throughout the city duly qualified nurses to attend upon the poor in their own homes. It began with four nurses and a Superintendent, and its growth was indicated by the fact that it now employed 19 nurses and a Superintendent.

There was very little in the way of ceremony at the formal opening of the new premises which followed the meeting. When the little lady from Wentworth had carried out her simple duty she was presented by the senior nurse (Miss Woods) with a beautiful bouquet of pink carnations. A bouquet of roses was presented by the Matron (Miss Hancox) to Mrs. Franklin, who has done a good deal of work for the Association in conjunction with the other joint hon. secretary, the Rev. T. T. Broad.

We wonder the Irish poor who are compelled to send their sick children to local workhouses do not rise in their wrath and insist upon the Local Government Board providing a more efficient system of nursing infectious cases. At a recent inquiry relative to the deaths of two children at the Lisburn Workhouse, it was elicited in evidence that the Head Nurse in charge of such serious cases as scarlatina and diphtheria was untrained and uncertificated. It would appear that this nurse made no use of the clinical thermometer or pulse to ascertain the physical condition of one child—and seems to have had the support of the doctor, who remarked:

"You used your common sense and experience, and came to the conclusion that the attack would be a short one?"

"Yes," replied the nurse, "it was short and soon passed away."

So did the unfortunate child, who died next day!

Common sense and experience are both invaluable, but where life and death are concerned, cannot be accepted in place of technical training. State registration alone can regulate the present irresponsible condition of affairs in the sick wards of country workhouses. We are moved to speak out owing to quite a pile of newspaper cuttings on the editorial table disclosing the same neglect of poor people who are compelled through lack of means to submit to such treatment.

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