

Christ's life must be *in* us before we can live it out. And, you know, He only gives Himself to those who give themselves to Him. We *cannot* live the life of Christ, however much we admire and desire to copy, unless we have the Spirit of Christ, the Holy Spirit living within us, and *that* means a clean sweep of all known sin and of *self*—if He is to come in and control the life. Is Jesus Christ worth knowing? And would it be worth while to reproduce Him in our daily lives? *It is possible*—feeble and faint though the likeness be; but it will cost something—is it worth the cost?

Are some of you thinking that we have got a long way from our subject—"The Nurse in Relation to Her Patient"? I think not. We were considering how a nurse, in this special relation, with its great and far-reaching opportunities, could be an influence to lift upward and Godward. And to me the simple answer to the problem is—*live* Jesus Christ, and draw men and women to Him. And you *can't* do this unless you know Him yourself—intimately (I say this very reverently), and unless you have His Spirit in you.

This is no emotional dream, but a reality and power that will send you into the hospital ward, to the trying private case, or out into the district in the slums with a deep sympathy, a clear discernment, and a capability of seeing the bright side of things that will act on the souls and minds of your patients as sunshine and fresh air act on a stuffy room. Yes, and it will make it impossible for you to do anything but the *best* work in your profession. *Don't* let it be said that the Christian nurses are not among the best professionally. It is most practical, for it enters into everyday life and work. One other thought. Do you not desire, not only that your influence should be for good and for God, but also that it should be exerted where it will count most, where the need is greatest? Let us be quite clear about this. The place where your life will count most is in the place which God shall choose for you. But I do ask you to consider the places where the need for Christian nurses is greatest. The vast heathen and Mohammedan world, where *no* scientific treatment and care of the sick is known, except such as is given by Christian doctors and nurses (and they are so few), who go to those lands. Lands where *anyone* can set up as a doctor, without the slightest knowledge of the most elementary facts of anatomy and physiology, their treatment being far worse to the poor patient than the disease in many cases. Lands, too, where the spiritual darkness and hopelessness is even greater than the physical. Is not God calling some of you to those most needy places?

But if it is true here at home that we cannot live Christ unless we have Him ourselves, most surely it is true in these non-Christian lands. And remember *only* He can raise and enable fallen, helpless men. They need *Him*. And when we plead for nurses for our mission hospitals, we do not ask for those who have never yet given their own lives to Christ, and could not take Him to others.

Now, I want to ask you a question. Did you ever get to know anyone with whom you had no communication? No talk, no fellowship in work, no interchange of thought? And has your life and character been moulded, at all perceptibly, by a mere bowing acquaintance, shall we say?

How can we *expect* to know the Lord Jesus Christ, to understand Him, and to grow like Him, if we do not find time for communion with Him?—Interchange of thought, *listening* to Him as well as talking to, and asking things from Him? In simple language, if we do not study our Bibles and give time to prayer? This means daily plodding effort, but without it we are very little use as Christians, to our Master or to others. And if the result really will be a life more like Christ's, winning other lives to Him, *is it worth while?* Worth while to start with what lies so near at hand, a simple practical way of preparing for larger service whether at home or abroad—that we may be ready for opportunities when they come. We do not want to think too highly of our own powers, but we cannot regard lightly the responsibility of a nurse's influence. You *know* that your word, and still more your life, has weight with your patients when they will take no notice of anyone else. In rich homes and poor, and specially with your fellow-women, what opportunities you have. I was a nurse before I became a doctor, and the hardest thing to me in this change of work was the loss of that close personal bond with other hearts and lives that no one, not even a doctor, has in the measure that a nurse has in relation to her patient. Do not lose, either through thoughtlessness or lack of preparation, the great opportunities thus given to you.

Four nurses from the Suffolk Nurses' Home have volunteered for plague duty, and have consented to be inoculated with plague vaccine as a precautionary measure. The East Suffolk Health Committee at a meeting last week at Ipswich agreed to remunerate the nurses during the time which they will be ill as a result of the inoculation, and expressed their appreciation of the nurses' public spirit and courage. Nurses are never found lacking in either of these qualities.

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