

of bright-coloured paper over the head, a few boxes and bundles, and we are ready for the "Beautiful Isle of Nowhere," or "Wonderland." What matters it if the boxes and bundles contain last year's toys! They have been out of sight, perhaps a long time, perhaps only a day or two, but they are tied up and opened at just the right time, giving almost as much pleasure as when they were new. Then I have made a spider web over and around the bed by using some brightly-coloured strips of tarleton and winding them in and out the sides of the crib and "criss-cross" over the top. They love to be shut in, as it were, and will usually object to their release.

Clothespins, if dressed in tissue paper and put on a cord across the bed, called by different and well-known names, will delight the child, especially if it's a "make-believe party." I have even dressed each of the little fingers and toes to increase the number of guests.

Children of this age do not, as a usual thing, enjoy the ordinary story. They may lie quiet for a little while and listen to "Little Pig" or "Mother Goose," but they soon tire and want something more exciting. Try them with make-up stories. They will understand better if you use familiar names for people. The cake houses and icecream porches which you may build, or rides on the chocolate horse, or milking the candy cow, will all be enjoyed.

Then, too, you can make a game out of every treatment, and a party out of each feeding. True, the tin soldiers and the woolly dog may be the guests of one, the dollies and the gingham cat of the other, but usually the patient will get the proper amount of nourishment, regardless of the fact that all have partaken. Take the dolly's temperature occasionally; it's a waste of time, but the small invalid won't want dolly to have one single thing done that baby has not, and he will willingly submit to almost any treatment if dolly has had it first.

I remember one child who was particularly hard to manage, and would not allow me to give treatment or medicine without a struggle, which so taxed his strength that I thought it would overbalance all the good that could ensue, and wondered if it had not better have been left undone. Then I stumbled on to an idea that perhaps he would enjoy being some one else (he was only two), so I called him Susie, saying, "Open your mouth, Susie, and take your medicine." He responded immediately, glad to have Susie get the bitter dose. I had no more trouble through his entire illness, always giving the disagreeable things to Susie.

So the day passes, and when night comes on we start with the dollies and the doggies, and

the little moo-cow, putting them all to bed first, and baby is almost always willing to join his pets when his turn comes.

The child a little older will enjoy kindergarten amusements, coloured beads and crayons, paper dolls, or a race of marbles across the cutting board, pasteboard houses and furniture, both of which are easily made. There are so many, many ways to amuse and entertain a child, even though they have few toys. Many a gorgeous necklace have I made for the small girl out of the diamonds from an old pack of playing cards, and many a garage, for the small boy, has been filled with advertisements from an old magazine. Hours have passed pleasantly for the girl of eight while she watched me fit a petticoat or dress to her dolly; while the boy that age will have great fun sticking old stamps into a scrapbook, and thus the days go by rapidly, both for patient and for nurse, if she does not dislike the work.

Many a nurse is excellent with adults, but does not possess the peculiar knack of caring for a child, but fortunately more nurses are seeking experience in this line.

A good nurse is as necessary to a sick child as a good doctor, for the skill of the doctor cannot avail unless his directions are carried out to the letter.

THE TRAINED WOMEN NURSES' FRIENDLY SOCIETY.

Miss Mollett begs to thank those who have sent letters of inquiry concerning the proposed formation of a Trained Women Nurses' Friendly Society, to all of which she will reply after the meeting to consider the question, to be held in London on Wednesday, 17th inst. As reported on page 287, the Irish Nurses' Association has decided to organize an Irish Nurses' Friendly Society—a step upon which we heartily congratulate them—and as the Scottish Nurses have now the opportunity of doing likewise, no doubt English Nurses will show an equal intelligence in the management of their financial affairs under the Insurance Act. Some means, no doubt, could then be devised by which the Nurses of the three Societies could be helpful to one another if change of domicile became necessary.

Some private nursing associations are, we understand, endeavouring to establish the point that as their nurses earn £2 2s. a week, with board and lodging, for the greater part of the year, this amounts in all to over £160 per annum, and therefore they do not come under the provisions of the National Insurance

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