

of 212 on last year. There were 633 volunteers of whom 207 were working in the mission field, 20 having sailed during the past twelve months.

Funds were very much needed in order to cope with the work, and to provide adequate premises.

Dr. W. H. Graham Aspland, from Peking, spoke of the direct results of Medical Mission Work, and of the great national movement going on in China at the present time where they were ceasing to bind their feet. There were 400 million females in China, which meant about 100 million grown up women. The binding of the feet in China was just as much a national custom as the constriction of another part of the body in the West, the fixing of boards to the heads of Hottentot children so that they might grow up with flat heads, and the cultivation of large lobes to the ears of the Indian women. Why had they bound the feet in China? For the same reason that feminine disfigurement was practised in the other cases—because the men wished it.

In China when a man wished to select a bride he looked at the woman's feet, when in the West he would look at the other end. As long as China was content to accept men's estimate of desirable femininity in their homes the women bound their feet, but now the Chinese man had discovered that he did not want mere femininity any longer; he wanted a woman to enter into his life, hence the unbinding of the feet was an absolute sign of the emancipation of women in China.

Less than five years ago it was not respectable for a woman in China to be seen in the same street as her husband, but recently the Secretary of Foreign Affairs was to be seen in a street in Peking arm in arm with his wife, and three weeks ago, the speaker said, he had heard of the opening of a Law School for women. A Christian womanhood in China would have an extraordinary influence.

The Rev. Frank Lenwood followed, pleading that his hearers should "Look not at the things which are seen and which are temporal, but at those which are unseen and which are eternal." He claimed for spiritual force that it is a very definite thing.

LECTURES ON BABIES.

Many nurses who appreciate the most interesting lectures on babies given from time to time at the Infants' Hospital, Vincent Square, Westminster, by Dr. Ralph Vincent, will be glad to know that a new course has been arranged to be given weekly on Tuesdays at 3.30 p.m., beginning on May 13th. The subjects are as follows:—*May 13th*, Rickets; *May 20th*, "Wasting Babies"; *May 27th*, Gastric and Intestinal Disorder; *June 3rd*, "Summer Diarrhoea"; *June 10th*, The Biological Chemistry of Infantile Digestion. The lectures will be illustrated by experiments and epidiascopic demonstrations.

Tickets price 5s. for the course can be obtained from the Secretary at the Hospital, and we hope that many nurses, midwives, and others will avail themselves of this opportunity.

A NURSING PROBLEM.

Those nurses who read the *Englishwoman* (and it is a liberal education to do so) are wondering who has written the most enlightening article under "Problems of the Day—An Underpaid Profession: Hospital Nursing." We advise everyone really interested in the nursing of the sick to read it. To quote:

"Nursing offers to its votaries the 'difficult way,' and the remarkable response of women who could command ease, if not distinction elsewhere, has always permitted hospitals to combine efficiency with economy in at least one department. Governing bodies employing nurses have been conscious of an eager stream of applicants, and have not unnaturally allowed themselves to take as an axiom that it is cheaper to wear out a nurse in ten or fifteen years, and replace her by a new one, than to treat her as a permanent and valuable worker. Governing bodies naturally consider the welfare of patients first of all, and economy and the training of medical students in the second and third places. Consideration for the nursing staff has too often presented itself as a kind of extravagance not easy to justify in public trustees. Now, after more than fifty years the matter suddenly takes a new turn; the stream of volunteers is slackening, the young women who desire to be nurses are no longer so unquestionably the best of their class, and it is time to consider whether the interests of the patients themselves will not in the near future necessitate a better status for the nursing profession."

The writer deprecates the late age of admission for training, considering the few years during which a trained nurse is considered at her zenith and argues for admission to hospitals before, twenty-three years of age.

The writer concludes:—

"Looking at the question as an outsider, the kind a person whom hospitals think has no right to an opinion, we would conclude that girls should be allowed to begin their training at twenty-one. . . . Registration would improve the nurse's status and security of tenure, and public opinion and the threat of a scarcity of probationers should raise salaries. An outsider's view cannot, after all, be ignored, because the supply of probationers comes from the outside, not from the inside, of the system, and it is the probationer's view of the advantages and disadvantages of the nursing profession which will control the situation in the end."

This is very true. The profession of nursing must be organised so that it is worth the while of intelligent and conscientious women to enter it. At present they are beginning to realise that it is not worth while, and they are shirking it. The majority of hospital managers are entirely out of touch with the evolution of women in industry. They are the type of men who lay down the law didactically "that the woman's place is the home." It may be, but apparently the Nurses'

[previous page](#)

[next page](#)