

We wonder if any member of the Nursing Committee of the Colonial Nursing Association, or whoever suggested this scheme, has ever spent a month, much less two years, on the prairies and in outlying districts in Canada, especially in the winter? Englishwomen who have lost their husbands and their homes are hardly in a mental condition to assimilate a new profession, and start work under the extraordinarily difficult conditions on the lonely prairie. Canadian-born women even dread this solitude, and statistics prove that the Montreal and other sanatoria for the insane are full of women who have broken down physically and mentally from the strain of loneliness during the long white winter months. One needs to be young and buoyant, with health and hope, to stand the monotony. A woman of sorrows should not be put to such a task.

At a meeting of the Scottish Council of Queen Victoria's Jubilee Institute for Nurses the quarterly report was submitted, and showed that the Council were directly responsible for the maintenance of nineteen Queen's nurses, four candidates receiving instruction in the Training Home, and five temporary nurses. Five nurses had received first appointments at Collessie, Dunrossness, Nairn, Sandwick, and Yoker. Scottish Queen's nurses to the number of 124 are at present on "active service," while ten others are giving part-time services in their own districts. Twenty-four visits of inspection had been made, including districts in the counties of Argyll, Ayr, Inverness, Lanark, the Lothians, Renfrew, and Shetland. The work in Edinburgh for the period showed that 1,120 cases had been nursed by the nurses from the nursing home, 21,591 visits being paid in this connection. Donations received amounted to £134 17s., and subscriptions to £224 10s. 8d.

By the kindness of the Secretary of the U.M.C.A. we are able to publish on page 375 a portrait of Miss E. L. Burrige, who passed away at Likwenu after a painful illness. Miss Burrige was trained at the North Ormesby Hospital, Middlesbrough, and was a certified midwife, receiving her training in this special branch in Glasgow. Miss Burrige, who joined the mission in 1909, showed the greatest aptitude in picking up languages from the first. She also had the gift of remembering faces, which, combined with her great sympathy, brought her into close touch with the people. A fellow-worker writes of her:—"It was quite amazing, when she was working at Likoma, to note how she seemed to know almost every-

body on the island—their history, their kinsfolk, and these last through all the complicated ramifications of an African genealogy. This ready sympathy, coupled with such powers of observation and memory, brought her into much closer touch with the natives than most of us. I have often envied these gifts, so useful to a missionary. . . . Many a native heart will be sore when the news is carried up the lake."

Miss A. M. Burke sends us the following little story from India:—

It is wonderful the incredible amount of superstition the poor, ignorant, Indian village man will be made to believe.

J. E., an Indian boy, aged about twenty years, a farmer's assistant, was admitted as an in-patient suffering from guinea worm. Very content and happy for twenty days. One morning about 8 a.m. I found him sobbing and crying aloud, beating his chest. I asked him what was the matter. All I could get as answer from him was—he began pulling the linen off the bed, searching under the pillows, and in a little cloth bag which he had in his hands (dear me! the contents of this bag would have pleased the heart of a juggler). I came to the conclusion he had lost something. Not quite grasping the meaning of the signs and words he was uttering, I called the Indian ward-servant to interpret, and this is what he revealed: The boy was in no pain, but his face wore the expression of great fright. He was so upset because he had lost a relic of his village god. This relic consisted of a dried, small-sized lemon, studded with toilet pins and covered with some white cotton thread. This had been given to him by his priest at the village shrine before he came to hospital, and as long as he had it with him nothing could affect him, and he would get well; but having lost it, this special cure was to follow: He would go mad. Poor man. Every now and then he would break out in lamentations, which meant the whole ward had to put up with the noise and sight of him weeping. Nothing on this earth mattered to him so long as he found *this* lemon. There was he offering all sorts of bribes to the ward servants if they would *only* find it for him. At last, to relieve his mental anxiety and make the ward peaceful again, I sent to him by the head ward boy another lemon, with the hope that it would satisfy his conscience. He accepted this with some misgiving, saying, as he did so, he did not know whether it would do, but all the same placed it in his bag with the words, "What has to be will be." "Kismet" seems to be the password of the working-class Indian, and it is wonderful to see the amount of self-control practised by him.

It was lucky that J. E. was nearly well, as his anxiety for his discharge was ridiculous. He left telling us he was going to the village shrine, which meant paying a donation to have the curse averted. Of course he was taking our lemon with him, and would likely get it endowed with special virtues. Such are the ironies of the East.

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