

For instance, the gentlemen who are now controlling the College of Nursing, Limited, protest that State Registration and all the educational benefits to nurses which would result from it, cannot be carried on without charitable doles. We know better. But it entirely depends upon financial organization—and who controls it. Anyway, the nurses are practically excluded from taking any part in the expenditure of their own assets, and are not permitted to take any responsibility worth a row of pins in so far as the financial control of the College Company is concerned.

We congratulate the Irish Nurses' Co-operative Hostel Co. on managing their own affairs with so much economy and success.

We have received as an Hon. Member of the American Nurses' Association a warm invitation to be present at the twenty-first annual Convention, to be held in Cleveland, Ohio, U.S.A., May 7th to 11th. It is to be devoted as far as possible to topics related to the war emergency, and all unnecessary expenses connected with the Convention will be eliminated. Would that we could be present, but such pleasures must await the end of the war.

Writing in *Nurses Near and Far* from Bhiwani, on "District Work and an 'Eye Camp' in India," M. F. Guyton gives the following interesting information:—

"I have had some district work lately. My first patient was a boy of six years, who had had smallpox, and who, through neglect, was covered with abscesses and sores. He could not be taken into hospital because we had no separate room to put him into, and he was too ill to be taken to the city dispensary every day, apart from the risk of infection which this would have meant. I used to think my patients in England, or more especially their friends, difficult sometimes to manage, but they were easy compared with the people out here. The people here think everything can be done by medicine, and every day when I tried to make them understand that he needed most of all to be kept clean (they objected to my doing it because of the caste system), and fed up with milk and other nourishing food, they only begged the more for medicine to make him well quickly, a medicine to make him hungry, a medicine to stop his cough, a medicine to take away his fever, and, of course, medicine for his sores. Unfortunately he died, after I had been going to him for eleven days. As far as one can judge, it

seemed probable that he might have lived if he had been fed properly. After that I had four other patients, whom I visited every day. In two of the homes I met with real friendliness and willingness to do as I advised, but in one or two they let me go in, but were a little suspicious as to whether the treatment was any good, and were more than a little curious about all sorts of personal questions, such as my age, why I was not married, &c., &c. In all I felt the lack of real chatty language. I can make myself understood in things I want done, but to get really friendly with people, one needs to be able to talk naturally and freely about all sorts of things. I enjoyed going to the people's houses, for I had always longed for the opportunity.

"We went to Kharar for our 'Eye Camp' in October. We began work on the Saturday, and worked as hard and as long as we could, and did 27 operations that day, most of them cataract cases. The 'eye camp' was even more successful this year than last. We did more than 120 operations, compared with about 80 last year. The lady who always arranges for the housing and nursing of these patients benefited by the experience of last year, and kept the people waiting to be seen separate from those who had been seen, and were waiting for operation. This made it easier for us, and also much more possible for the native pastors to preach to the people. As it was, we used to have about 20 patients and their relatives round us as we operated on the verandah. It was most amusing to see the way they immediately took their turn on the table, by sitting on it the moment the last patient was lifted off. They had decided not to waste any time, or to run any risk of losing their opportunity. One poor man reminded us of the impotent man at the pool of Bethesda, who had no one to put him into the pool, and so lost his turn many times; this man was paralysed on one side, and so was unable to get on the table by himself. We noticed he had been sitting for some time, and asked him why he was waiting: finding he was waiting for help, of course we saw that he had the next opportunity. Great was the joy of some of the patients when they found on the opening of the bandage that they could see, after many months of blindness, and they were full of praise for the clever doctor who had given them back their sight. Mr. Morgan always tried to make them understand that it was God's doing, and their thanks were due to Him. One man was given permission to sit up, but told that he was still to wear the bandage, and must not touch it, or the operation

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