

and to the encouragement of the right type of women to enter hospitals for training, if the Minister did not sign the Syllabus of Training in General Nursing.

6. That, as the Nurse Training Schools are now beginning their courses of instruction for the autumn session, it is imperative that the question should be now settled, otherwise the Syllabus cannot be carried out in time for the State Examination in 1925.

7. That there is no opposition to the Syllabus for Education and Training in the Nursing of Sick Children, which, except that gynæcology, which cannot be taught in a Children's Hospital, is omitted, is identical with the Syllabus of Training for General Nursing.

The Registered Nurses' Parliamentary Council earnestly trusts that the Minister of Health will, now that the Syllabus of Examination is before him, sign the Syllabus of Training for General Nursing, so that there may be no further delay in giving full effect to the provisions of the Nurses' Registration Act, 1919.

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THE NURSES' MISSIONARY LEAGUE THE VALEDICTORY MEETING.

"What a splendid day to remember!" was the comment of one sister from India who was present at the Valedictory Meetings of the Nurses' Missionary League, held in University Hall, Gordon Square, on October 5th. Morning, afternoon and evening gatherings were attended by record numbers of nurses from many hospitals and from many lands. The morning session was mainly devotional, and was conducted by Miss A. H. Small, who spoke very beautifully of Christianity and especially of missionary service as a great and wonderful adventure, and then dealt with some of the problems, both personal problems and those connected with the work which confront a missionary in distant lands.

At the afternoon gathering there was much conversation over tea and cakes, and some beautiful songs and piano solos were contributed by Miss P. Yelverton Dawson and Miss Saumarez Smith. The Rev. Garfield H. Williams, O.B.E., M.B., B.S., gave an address on the "Problem of India." Dealing first with Mohammedanism, he sketched the rise and spread of the early Christian Church in Asia Minor, and its decline, which made possible the rapid advance of Mohammedanism which swept all before it. For centuries the Church did not respond at all; then it responded by the Crusades, by war and force of arms. Through the centuries, with the exception of a few individual lives like those of Raymond Lull and Henry Martin, the response always has been war, and even to-day the Mohammedan sees Europe deluged in war. By contrast, Dr. Williams described sights seen by him in the mission hospital at Bannu, N.W. India, where the English Sister ministered with love and care to the great rough men wounded in Frontier "scraps." "This is a

method," he said, "that cannot fail in touching the Mohammedan world to-day. The force of arms has failed utterly. It is time we really tried the other method of showing the love of Christ. What they want is not creeds but a *life*. Go and live the Christ life in front of them, and then Christ's kingdom will have a chance."

This address was well followed by Miss H. Anthony (trained at the Derbyshire Royal Infirmary) who spoke of work amid Mohammedans in the Hospital at Old Cairo, where there are 153 beds for men and 48 for women, in addition to the 1,000 ankylostomiasis patients who are accommodated in the grounds. Miss Anthony told some fascinating stories about patients, and especially about one little girl brought to her, like a wild thing, lying, swearing and stealing, and now, through love and Christian influence, transformed into a smart reliable nurse, able to prepare the theatre for big operations, and besides this, baptised and confirmed as a Christian.

The evening meeting was pre-eminently the time when the world-wide call was sounded. Mrs. Sharpe, the chairman, spoke of the two great gifts which a missionary nurse takes with her, the gifts of healing and of brotherhood. Miss Richardson then read messages from eight of the Sailing Members of the League, and six others who were present on the platform spoke briefly. Such different spheres of work these Nurses described!—one going to a hospital in China where there have been three doctors but she will be the first Nurse; another to pioneering in the Lushai Hills on the borders of Burmah, where there is no hospital at all and only one other nurse; another to a pioneer hospital in Papua, the first medical work in the district; another to Mandalay; some to China, some to India, some to Africa. Three points came over and over again in these messages, the help received at meetings of N.M.L. in various hospital branches; the joy of being called to this high service, often in face of many obstacles; and lastly the plea for prayer. As one speaker said: "We could not possibly go unless we felt that God had called us, and unless we knew that we had behind us the prayers of friends at home."

After the new recruits came the veteran, Miss A. Hammond Bell (trained at the Royal Infirmary, Oldham), who spoke from experience of thirty-three years of service on the Congo. When first she went out there was no hospital, and operations were done in a grass hut, the doctor kneeling on the mud floor. At the end of her first furlough, a small hospital was opened, and now there is an up-to-date hospital and operating theatre. Every disease met in England, except cancer, is found there, and many tropical diseases as well. In San Salvador last year, there were over 15,000 men and 19,000 women out-patients, 334 in-patients, 123 maternity patients and 2,779 vaccinations. Besides these there is a constant fight against sleeping-sickness, and there are seldom fewer than 200 patients on the books being treated for this. It is hard work for one doctor and one nurse, and there is much ignorance to be combatted, for

[previous page](#)

[next page](#)