THE HEALTH VISITORS' LEAGUE SECTION.

Hon. Secretary :—**Miss A. DUNN, R.N., Tilaunia,** *via* **Kishengarh P.O., Rajputana, who will gladly receive reports, and articles for insertion in this section.**

The Nervous Child

(MENTAL HYGIENE)

The mother has great influence on the baby's mind long before it is born, therefore she should do her best to be calm and placid and good-tempered.

The seeds of nervous instability are sown during the first few months of life, so there should be no over-stimulation. Excitability may give rise either to errors of digestion, to sleeplessness, or both.

Parents and nurses must learn to be observant, or many early warnings may be missed. A child expresses itself by gesture and by spoken language, and we must learn to understand the various signs, because gesture reflects inward emotion, a child who is over-excitable must be kept QUIET.

SIGNS OF OVER-STIMULATION.—The child becomes twitchy, unduly excitable, or sleep becomes defective.

Sleep is the only restorative for tired cells (brain and body) so all growing organisms need a large amount of sleep. Most Doctors recommend from 5 to 7 years eleven to twelve hours rest
,, 8 to 11 ,, ten to eleven ,, ,,
,, 12 to 14 ,, nine to ten ,, ,,

SLEEP—is a habit, and its rhythm once broken the power to sleep may be lost; therefore there should be absolute regularity for bedtime. Surroundings should be airy (but see that there are no draughts), comfortable, and as quiet as possible. Children up to the age of 5 should have a sleep during the day.

FEAR.—Avoid making a nervous child fearful; if he is afraid of the dark do not try to punish him, or ignore his request for a night-light, and in time he will cease to ask for one.

The stability of the human brain is dependent on its slow development, so the mental development must be retarded (kept back).

SYMPTOMS OF BRAIN FATIGUE.—Disturbed sleep, twitching restless movements, irritability, or fear.

Exhaustion of the brain gives many warnings before the more serious symptoms develop. Inattention or laziness should not be punished till one is sure that the child's brain is not exhausted.

THE RESERVED CHILD is more complex, and not so easy to bring up. Sensitive, shy and retiring children need encouragement and sympathetic understanding and infinite patience.

HABITS.—Parents and nurses must remember that habits formed early in life are going to remain habits when the child has grown up.

Irritable correction is worse than useless; the forming of habits is a slow process, and good habits result from long and careful supervision. Fear may make a child untruthful or wilfully disobedient, and this should be corrected not by isolated punishment, but by watchfulness and careful handling until the fault is cured. We should be always THINKING AHEAD of the child, for example: Give a torch if he has to go into a dark room. We should aim at preventing punishment situations from arising, at providing situations in which proper conduct becomes easy and natural, at EXPECTING good behaviour and obedience and we should be consistent in our expectations.

ROMANCING or MAKE-BELIEVE—when it occurs must not be regarded as simple lying; questions should be asked in such a way that a thought-out answer is necessary, as in this case the child will not lie.

The Nervous Child may shew many vagaries in its bodily health, its weight may fluctuate unduly, the child may be subject to headache (in this case, have its eyes examined), or to bad circulation (blue hands and feet), and thus need special care.

A child with bad circulation must have its work regulated to meet its physical powers, and must not be pressed; sometimes the brain suffers from the same stagnant circulation, and in consequence its nutrition is defective.

Over-stimulation or emotion (for example, a visit to the cinema) may disturb the appetite or the normal digestion of food, or alternatively, a faulty digestion may lead to malnutrition and in the course of time to nervous symptoms, or even to mental deterioration.

To the Nervous Child SLEEP is of the utmost importance. Sometimes if this does not come at once the child begins to suggest to himself that he may not sleep, and even may become afraid that he cannot sleep. This is a very real anxiety, and must not be treated harshly, for to do so is to enhance the difficulty and not to remedy it. Again, the fact that the child does not seem to be any the worse when he obtains only a limited amount of sleep does not mean that he is incurring no damage, for to neglect sleeplessness is to take risks that may lead to life-long trouble.

Unobtrusively teach the experiences of life and how to meet them, and whilst protecting the weaknesses, you will build up a character that will become increasingly stable with the advance of years.

[With acknowledgements to Sir Maurice Craig, M.D., F.R.C.P., Physician for Psychological Medicine, Guy's Hospital, London.]

'LAMDA'.

THE STUDENT NURSES' ASSOCIATION SECTION.

Miss Robson's Address at the Lamp Lighting Ceremony at Vellore

When I was trying hard to learn Tamil there was a certain book which we had to read and one paragraph of that book spoke of lamps and lighting. It said 'From one lamp many lamps are lit—from many lamps many, many lamps are lit and from many, many lamps many, many, many, lamps are lit until all the world has the benefit of this first lamp.' There is therefore a great responsibility in lighting a lamp for the gleam from it is bound to have some influence.

We have made a vow to-night—a promise we have said in our hearts that this light shall not go out. We have been given a uniform—one to be proud of and to honour. Our lamp is now our very own to be trimmed and to be daily filled with oil.

THE FIRST LAMP.—Let us try and go near the first lamp of this kind. Perhaps it is not quite correct to call Miss Nightingale's lamp the first lamp of nursing, for there were many smaller lights which tried to flicker before her time, but their small flame often died down and nearly went out. I feel that the big thing which Florence Nightingale did was to discover the right kind of oil for the lamp of nursing which has never allowed that light to fail.

We know the story of Florence Nightingale and all about the work she did. One of her finest pieces of work is perhaps least known—her work for India—in caring for the sanitation of this country and so saving the lives of many of her people. Miss Nightingale had a great love for India and it would delight her heart to see how many Indian girls are now following in her footsteps.

Rather than speak of the work Miss Nightingale did I think it is more important for us tonight to try and find out where her oil came from and what was the strength of her light.

AIM.—Miss Nightingale began her life with an aim—that is, she was a woman with a vision—to have a vision means to be able to get out into