

that they need. That keeps any extra stuff from cluttering up the hospital.

We have kitchens that they may hire, in which to do the cooking, so that it is never necessary for them to bring their charcoal stoves into the hospital.

None of them are allowed into the operating room, and in the delivery room only allowed to stay by the head of the table.

We are hoping now that sometime in the future we may build a chapel for daily prayers and for lectures of various sorts, for the patients but more for the relative.

THE PROBLEMS OF A NURSE

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PLEASE remember when you read this that I am writing of over twenty years ago. I was "a New Chum" in New Zealand doing private nursing in one of the cities. The following is one of the exciting experiences of those days. I was engaged to nurse a case in the northern part of the north Island. When the time came for me to go, there had been extensive floods in those parts and I had instructions to land on the opposite side of the river to where the Homestead was, because no trap could get from the usual landing stage to the place I had to go. I was told the husband would meet me there. When I landed there, I felt lost, as I saw only a few houses in the distance, but soon the husband came in his tiny boat, and explained we would have to cross the river in this to get to the landing stage on his farm. I noticed he watched my face anxiously as he told me—knowing I was recently out from England he wondered if I would "funk" the experience. However, I was quite willing for the adventure and even when we crossed the strong current did not feel any fear. We landed safely on the rough home-made landing stage close to where a house and trap was waiting for us. It was with the utmost difficulty we arrived at the house as the trap sank into the mud almost up to the axle. The house and a small piece of land was surrounded with water. My patient had got her baby and the doctor had been unable to visit her again because of the floods, so they were truly thankful to have at last got the nurse there. Both mother and infant did exceedingly well but the father developed blood poisoning in his hand. I used to get up at 5 A.M. to dress it for him before he went out to do what he could with the other hand, and it was doing very well with the dressings I happened to have to

hand. But alas! the dressings came to an end. I was told the only place where more could be got was five miles away and I must go and get them—they seemed to think there was no other way but for me to go on horseback and get them. I told them the extent of my riding knowledge was little more than that of riding a donkey or pony at the sea-side. But they assured me it would be alright—they would give me a very safe horse to ride. Well! I started off. The way for some distance was through the bush on a track which was like a quad mire. The horse often sunk into it almost up to knees and had to plunge to get out of it. I hung on like grim death—with all my might and main. I did not know which part of the horse I would land on next, but somehow I stuck on and nothing more serious happened than being knocked against tree trunks or barbed wire and I finally landed there and returned in triumph with the necessary dressings. The husband's hand steadily improved until it quite recovered. So grateful were they that they kept in touch with me for years and often sent pressing invitations for me to visit them, which I did on more than one occasion, one of which I had the pleasure of a twenty mile ride to the sea coast.

New Zealand is a comparatively new country and as always the hardest part, in some respects, always falls on the mother. The above patient told me of a sad case which had happened within a short distance from her home about a month before my visit there. A mother found herself in labour with only her little girl of twelve year. She sent her away to the woman who was to look after her, who lived some miles away, when the woman and child returned they found the mother had given birth to twins and was dead. How terribly sad.

I was also told of another case in a lonely part of New Zealand. There was no one near for miles and advance labour had come on, but fortunately a beggar came knocking at the door, and she called him in to come to her assistance. He did all that was necessary and probably saved her life.

I met a lady who had also lived in the "waybacks" when a girl. She told me how she had been sent for to help a neighbour in labour because there was no one else available. She knew nothing about it and was in great distress when a happy thought struck her. There was a shepherd somewhere in the neighbourhood and he had to deliver sheep, surely he would be able to help. Off she hurried and brought him back and he delivered the woman and probably saved the life of mother and baby.

But the Government of New Zealand came to see this kind of thing could not go on and Mr. Seddon, then the Prime Minister, was the means of Government Maternity Hospitals being started in the four largest cities

of the Dominion for the women whose husbands earned under a certain sum. The patients, who were able, could go there and have the best of attention at a very small charge. This was a great advance, but did not meet the needs of those mothers who could not leave their children and homes because there was no one to take charge while away.

The Government in the meantime had been training midwives and endeavoured to induce nurses to go and start practice in the "wayback" districts, the Local Boards giving the nurse a subsidy. Many of the nurses who had been used to a different life found the conditions too hard, and were not suitable unless they could ride a horse and so get to these otherwise inaccessible places.

Then the Government undertook to train those who were suitable *free* if they agreed to give so many years of work for the "wayback" places. I do not mean they had to work for nothing, indeed they were subsidised as stated before, as well as being able to make a certain charge for each case.

I think there are few places, if any, where are not one or two such nurses now. No doubt this has helped to give New Zealand the proud distinction of the lowest death rate amongst babies in the world. But the work of "the Royal Society for the Health of Women and Children" undoubtedly, (to the unprejudiced mind), has been the largest factor to bring about this transformation. The close net-work of Plunket nurses under the founder of the system, Sir Fredrick Truby-King is doing marvels for the health of the young in that country.

THE BRAVEST BATTLE

1

The bravest battle that ever was fought
Shall I tell you where and how?
On the maps of the world you will find it not;
It was fought by the mothers of men

3

But deep in a walled-up woman's heart—
Of woman that would not yield;
But patiently, patiently bore her part—
Lo! there is that battlefield!

2

Nay, not with cannon or battle shot,
With sword or nobler pen;
Nay, not with eloquent word or thought,
From mouths of wonderful men.

4

No marshalling troop no bivouac song;
No banner to gleam and wave;
And lo! these battles they last so long—
From babyhood to the grave

5

Yet faithful still as a bridge of stars,
She fights in her walled-up town—
Fights on and on in the endless wars,
Then silent, unseen—goes down