

CONTRIBUTED ARTICLES.

THE TRAINING OF WELL EDUCATED INDIAN GIRLS.

BY MISS WILKINSON.

(Read at the last Conference.)

WE have met together to consider the very vital need there is throughout the whole of India for Indian girls of good position and education to take up nursing as a profession. At the present time there are practically no such girls in training.

We who are responsible for the training of Indian girls know only too well the absolutely wrong attitude that the vast majority of heads of schools and also parents adopt toward nursing as a profession. Indeed they do not consider it in that light, and parents especially are so behind the times and prejudiced as to think of it simply as menial work, mehtrani's work.

To a trained nurse who is proud of her position and profession this attitude is contemptuous. It is so utterly false and wrong. What profession makes such great demands, the highest humanity can fulfil for humanity, self-sacrifice, the willing giving up of one's time and strength, the utter giving of one self for the healing of the bodies, souls and minds of one's patients. The need of the capability of taking responsibility—of self-reliance, of courage and nerve in dealing with emergencies which may mean life or death to the patient, all this should appeal to the best type of girl.

A trained nurse should be an intelligent fellow-worker with the doctor. By far the greater number of illnesses depend far more upon good intelligent nursing for recovery than the giving of medicines, etc., and a doctor's work, medical or operative, can be completely frustrated by an unintelligent nurse who knows only the mere letter of the orders given and does not understand the reason.

There should be in India Indian nurses fully capable of taking charge of a hospital, lecturing to and training nurses—but how many such are there and why? The reason is not far to seek. Girls sent from home or schools and colleges are those whom parents and teachers alike think are not capable of training as teachers or doctors, etc. And so it is with the utmost difficulty and much expenditure of time, patience and strength that most of the probationers are got through the necessary examinations, and in the end can only be subordinates.

Nursing the sick is hard work, difficult work, requiring devotion and self-sacrifice, and as such should meet with a great response in the generous spirit of youth. We beg of those training the young generation to inspire their pupils with the highest ideals of unselfishness, courage and pluck, without

which characteristics it is useless for any girl to enter for training if she is to take a responsible position in the nursing profession. It is the lack of these qualities of pluck and perseverance which results in a lack of candidates for training as nurses.

We ask them to make an appeal to their pupils to take this tremendous opportunity which nursing gives them of helping their fellow-countrywomen in their time of need, and thus serving their Motherland of India. To those of us who are Christian what closer following in Our Master's steps can we give? He who went about doing good, healing the sick.

AN EXPERIENCE IN VILLAGE WORK.

BY MISS SAVAGE.

The following is a case which occurred just recently. I was opening up our dispensary one afternoon when several young men came to ask help for a woman who was obstructed in labour in a house near by. I sent for a woman who could tell me about her, and hearing the particulars wrote a note to the doctor who was enjoying an afternoon off, and closing up went to see what preparations could be made.

In the narrow alley around the door were crowded 50 or 60 women and girls. The door, a narrow slit in a low wall, led into a tiny room about 5 feet x 6 feet, and on the floor I found the patient with a number of women squatting around. This was the third day of labour. Four hours before the head had been born. Both arms had been brought down and pulled on till one was almost severed from the body. Pains had ceased and she had been lying in this condition with nothing between her and the mud floor ever since.

My first request was for hot water and a bed; but who would get them? The community to which the patient belonged was a particularly clamorous one. Everybody talked at once but no one would assume responsibility. Men folk were told to bring a bed, and the mother-in-law, a helpless unit in the noisy crowd, was sorted out and set to light a fire. I then looked round for a larger room in which to work and found one which would admit of a bed and a limited space for operations. The patient's friends in their alarm had called a second doctor, and in the interval he and his nurse arrived on the scene, but seeing how things were, and learning that the Mission Doctor had also been called, they gladly left the case to her. What an interminable wait it seemed for that bed! The doctor arrived and still it had not come. The friends gaining confidence began to help. At last it appeared, but what a bed! It fell to pieces in the bearer's hands. Pegs of wood had to be driven into its joints to make it stand firm. Moreover, half the coarse cord with which it was laced was missing. Another bed was procurable we heard, but on enquiry it was found to be in even a worse condition. The patient, begging to be "made unconscious," was brought in, and after ejecting half a dozen women whom the appeal to "do as they would be done by" failed to move, we began work. Another half-dozen more intimately concerned were allowed to watch from an adjoining room.