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By ABRAHAM JACOBI, M. D.

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THE HISTORICAL DEVELOPMENT OF MODERN NURSING.*

By ABRAHAM JACOBI, M. D.

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NURSING is as old as the human species. Even among animals, such as they are at present, we find occasional sympathy with fellow-suffering, and meet with efforts for the purpose of relief. We can not imagine that human beings, in ever so remote prehistoric times, should have lived together, or near each other, without mutual attempts at relief, when suffering or sick. But this is presumption only, not history. No book, no tradition refers to facts in regard to the subject until the times of ancient Hellas and its successor in civilization, ancient Rome. Antiquity yields but few proofs of systematic nursing. It is true, hospitality was the pre-eminent virtue of the Greek. The stranger was always welcome. If he was sick, he was doubly so. In all Hellas poor sick citizens found ready admission to and nursing in the houses of the rich. It may be that the facility of finding private relief on the part of the sick was one of the causes why no systematic and collective efforts for the purpose of attending and nursing the sick were ever made to any extent. That such was the case, there can be little doubt; for the temples of Æsculapius and the adjoining residences of the physicians were probably not hospitals, but temporary domiciles for those who congregated in large numbers around the homes of the gods. Of the same nature was the edifice erected by Antoninus Pius near the temple of the Epidaurian Æsculapius. In Italy, also, the temple of Æsculapius, on the island in the Tiber, between Rome and the outlet of the river, was never of much importance as a hospital or sanitarium. The only real hospitals at all comparable with institutions such as we have, existed in favor of human property, and for the benefit of soldiers. According to the testimony of Columella, Seneca, and Celsus, the Romans had hospitals for slaves, warriors, and gladiators. In Greece, also, as early as the period of

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Solon, those injured on the battle-field were attended and nursed at the expense of the community. Of the great Cæsar it is well known that he had a regular medical service in his armies.

There is a word in the ancient Greek which has given rise to the belief that Hellas may have had hospitals. But, as no facts and reports sustain that supposition, it is probable that *ἰατρειον* meant a medical office, a policlinic, perhaps, but not a hospital. Real hospitals were not built by either Greek, Roman, or Hebrew. The commonwealth of the latter was hierarchic and intolerant. The stranger—though he who was permitted to live in Judea was to be treated like a member of the community—was to be exterminated, and must not be spared. Thus, while there are no proofs of the existence of hospitals for the friend, a painstaking care in favor of the stranger was out of the question.

Antiquity, however, is not without its humane culture. The reconciling feature in that immense picture of indifference and thoughtlessness is found in Buddhism. We have the reliable report of a genuine hospital founded by a king in Ceylon, in the fifth century B. C. One of his successors in the second century B. C. is credited with eighteen hospitals under regular medical superintendence. In the East Indies hospitals are mentioned in the third century. Nor have other civilizations been slow in outgrowing the humane exertions of Hellas, Rome, and Palestine, for Prescott tells us that there were hospitals in Mexico before the Christian Spaniards introduced the blessings of torture, inquisition, and extermination. And when finally the Christians, in the second century after Christ, bethought themselves of the poor and sick and established hospitals, the largest and most effective ones were founded in Asia Minor and Persia, where Buddhism had prepared both means and public opinion—Buddhism, under whose beneficent rules aiding the poor and nursing the sick were two of the religious duties of kings and princes. Nor has Christianity the claim of having the first *large* hospitals. The Arabs had many good and large hospitals about 1200. Cordova, in Spain, sustained fifty within its own walls.

The first information in regard to Christian hospitals dates back to the second century; other reports go back as far as the fourth, and a few others to the sixth century. In most cases the establishments were not exactly hospitals, but stopping-places and dormitories for pilgrims on their way to Rome. To what extent such institutions were necessities is best proved by the order of the so-called "Bridge-makers" (*Hospitaliers Pontifes*), whose original vocation it was to protect pilgrims from the robberies and rapacity of the ferry-men on the large rivers. They existed a long time, became rich and degenerated, and were finally dissolved in 1672 by Louis XIV.

The hierarchic character of the institutions calculated to benefit the poor remained intact until the period of the Crusade wars. At

that time Italian and German merchants initiated the great combinations of the several orders of Hospital Brothers.

Their efforts were not isolated or altogether premature. For there existed a humanistic movement among the better classes of the Occident, on a Christian basis it is true, but spontaneous. Particularly in the cities, societies were formed for the purpose of nursing the sick and aiding the forlorn. Guy, of Montpellier, France, established a hospital in that city, *of larger size*, while up to that time all the institutions of a similar character were small and unavailing, and located outside the walls. The new hospital in Montpellier, and seven more French houses, and two under the same direction in Rome, are first mentioned in a bull of Pope Innocent III, in the year 1198. The secular character of the institutions was at that time fully recognized. In connecting four clergymen with them he commanded that they were to attend to spiritual duties only ("*sine contradictione et murmuratione*"), and not to interfere with the office of the superiors. In 1204 the same pope recognized the newly established Hospital of the Holy Ghost, on the old Tiber bridge, in Rome. With the peculiar mixture of ferocity and mildness so common to the mediæval age, the same man who humiliated emperors, dethroned kings, and persecuted the French heretics with fire and sword to extermination, looked for the helpless and sick in the streets and saved illegitimate babies from their watery graves. Guy de Montpellier's creation, the Order of the Holy Ghost, did not remain long in its original condition. Pope Gregory X (1271–'76) subjected all the houses belonging to the order to the one located in Rome, the first step in the attempt at depriving the order and its hospitals of their secular supervision. It was finally disposed of by the bull of Pope Sixtus IV, of the 21st of March, 1477. Meanwhile and afterward the order spread over all Europe. With its increasing wealth and power it degenerated in the seventeenth century. Though clerical by name, it was the most secular of all the institutions of dissipation. Grand-master and officers lived on the fat of the land and their immense income. In vain Louis XIV attempted to abolish it. The only change French royalty could work was its transmutation into a royal order. In some of the provinces laymen had succeeded, however, in controlling the management. Thus it was in many parts of Germany, where, between 1400 and 1600, several of the institutions belonging to the order were secularized. In Italy, however, the Order of the Holy Ghost remained exclusively clerical. As late as in the beginning of the eighteenth century it had great possessions in Europe and the West Indies.

The Order of St. Elizabeth was founded in 1225 by Elizabeth, daughter of Andrew II of Hungary, and wife of Landgrave Ludwig of Thuringia. Women need not complain that domestic virtues do not warm more than their own home, and do not immortally challenge the admiration of posterity. Her name will never die, when many a great

warrior's memory will be buried out of sight. She founded two hospitals in Eisenach, and another in Marburg, into which the twenty-two-years-old widow retired. The rule was to nurse the female sick only. But when Francis-Joseph and Windischgrätz (*par nobile fratrum*) let loose their Croats over unhappy Vienna, in our own times in 1848, the Sisters of St. Elizabeth were in the front ranks bringing aid and comfort.

In 1171 the orders of St. Protais and St. Gervais were founded in France. About the same time, the houses in Roncesvalles and Burgos. In 1409 José Gilàberto established an order in Valencia for the special purpose of nursing the lunatic.

Those I have mentioned, with several others, were orders founded by the Church, or whose supervision soon became clerical. Those which, though all of them were anxious to submit to the Church, for spiritual reasons, succeeded in retaining their autonomy, must be credited with more real success in accomplishing their ends. Among the first we have any information of is the order of St. Catherine. Its members nursed poor and strange women and girls three days, and buried those who died in prisons or in the streets. In those good old times to which many dissatisfied hearts of to-day look back with longing eyes, those good olden times with their innocence, simplicity, and piety, this dying in the street was of common occurrence, and the Sisters of St. Catherine had plenty of work. We have not only accumulated seven more centuries, but gained more safety, more comfort, and more confidence in the future of mankind.

In the Hôtel-Dieu, the immense Paris hospital, thirty-eight men and thirty-eight women served as nurses. The places were, in later centuries, filled by Sisters of Mercy.

The Brothers of Mercy were founded in 1534 by Juan di Dios (John of God) in Granada. They were laymen, entered the order at between eighteen and thirty-one years of age, and nursed the sick of every faith and creed. Within a hundred years they possessed 18 hospitals, and there was a time when in Spain and the West Indies they had 138 hospitals, with 4,140 beds, and 47,000 sick annually, and in the rest of Europe 155 hospitals, 7,210 beds, and 150,000 sick. Twenty-five years ago they had in Austria alone 29 hospitals, with 20,000 patients.

Of similar character were the Obregons, founded about 1600, with their complicated duties of nursing the sick, praying, and repenting. This multitude of duties must have crippled their efficiency ; they can not compare with the Brothers of Mercy.

The " Bons Fils " (Good Boys) were founded in Flanders in 1615. They were tradesmen, with the duties of nursing the sick, mainly the alienated in their homes, and giving elementary instruction.

The Confraternita della Perseveranza was established in Rome, in 1663, for the purpose of caring for the strangers in the taverns.

The Order of the Sisters of Mercy was founded in 1617 by Vincent de Paul, a preacher. In a sermon he placed before his congregation the case of a poor and sick family, urging their co-operation and sympathy. Enthusiasm and much zeal were roused, and a noble and gifted woman, Louise de Marillac, the wife of Legras, the secretary of Mary of Medicis, enlisted herself at once in the service of that family and of many equally indigent. She and her friends worked both in private residences and in hospitals, and were soon recognized as an order. As early as 1636 a house was founded for the care and education of children and women, a foundling hospital was established, and a home for the alienated in 1645. Her order owned, after a single century, 290 stations, and had 1,500 members, who entered between the ages of eighteen and twenty-four, bound themselves for life to the order and the Church, and worked in hospitals and private residences, in the interest of both women and men, in rescuing fallen girls and educating the young. In Rome, mainly in this century, they assisted those taken with infectious and acute diseases who could not be admitted to the public hospitals, and everywhere they attended the chronic cases of sickness of all denominations. Their foothold in Germany dates from this century only. Their greatest adversity was the all-purifying thunder-storm, the French Revolution. Many emigrated to England, but during the Napoleonic wars their services were so much appreciated as to procure for Sister Martha the cross of the Legion of Honor.

All of the orders mentioned were composed of Catholics. Not one of them but was intimately associated with the Church. In this connection it ought not to be forgotten that all the culture and knowledge of the mediæval period was confined within the limits of the Church. Within its fold the whole progress of mankind, slow though it was, toward humanistic evolution, was developed. Thus the efforts of the Catholic Church in favor of the poor and sick must be duly appreciated, the more so, as the so-called "Reformation" party exhibits nothing but blank leaves in the history of ethical and humane development. The revolutionary movement prepared by powerful minds for centuries, and finally carried out by Luther, did not result in any good to the sick and poor for a long time. Indeed, the success of the Reformation was in part due to the greed of German princes, who gained a rich harvest by appropriating monasteries, hospitals, and all other possessions of the Catholic Church. Thus the Lutheran Church, or churches, were left so poor that if they *had* the will they had not the *power* to make any pecuniary sacrifices in the interest of the poor and sick. But *even that will* they had not, could not have. For the first axiom in Luther's doctrine was this, that *not work performed, but faith only*, made the Christian. That doctrine was a long stride backward; it fired the imagination of some bigots, chilled the hearts of most men, sustained the egotist, and created dissensions. Never was there a

greater failure. The poetry of the Church gone, its efficiency gone, that was the "reformation." Not until some decades ago did we know of Protestant unions established on the plan of their Catholic predecessors. But the *male* orders never tried to imitate the useful example of the Catholics. *They* did not care for the sick or the poor. *Their aim* was and is "home-mission." *They* are replete with faith, distribute Bibles, and glory in the conversion of that Jew who was baptized, once or often, half a dozen years ago, for ready cash. The women, as always, have done better. Their hospital orders, mainly the Deaconesses, have done good work this half-century, both in public institutions and in private. During the war-times in Germany they and other associations established on similar plans did good work, and deserve all the praise bestowed upon them. Their recognition was complete. Princesses joined hands with them—the Archduchess of Baden, Princess Alice of Darmstadt, the Empress Augusta. And not only in military hospitals did they earn deserved praise. Some general hospitals, such as the Augusta Hospital in Berlin, derive great benefit from their incessant and intelligent labors. I do not mean to stint praise, and therefore make this statement of their work, which has been performed under apparently great difficulties. These difficulties are the very rules, for instance, of the Deaconesses of Kaiserwerth, from which I quote for your edification the following introductory paragraph :

"The Christian women who wish to undertake the office of a nursing sister, as deaconess for the sick and poor, must possess a somewhat advanced Christian knowledge. Mere church-membership, mere attendance on Christian assemblies, and reading of Christian works of edification, are not enough. The love of reading the word of God, and a diligent use of the same for a long time past, must exist, as well as a knowledge of the more important histories of the Old and New Testaments. There must also be a knowledge of the sinful heart from their own personal experience, as well as experience of the grace of Christ, in order that they may have learned to despair of themselves, and in their weakness to trust only to the strength of Christ. A Christian walk of life must for a long time have adorned such Christian women," and so on, and so on. You will admit that in the face of so much hyper-religious sentiment an active, unselfish, modern woman must feel bewildered.

After all I have said, it is evident that the cause of humanity was originally not hampered by the efforts of the Catholic Church. On the contrary, many centuries ago it was the only safe deposit, inasmuch as the Arabs lost their importance in humanistic evolution from the fourteenth century, for the gradual development of human feeling. But that human feeling was not fostered and protected because it was human ; the Church had but one purpose, the aggrandizement of the Church. The latter has a meaning in the case of the Catholic Church, which is at least a union, and has a uniform standard, which

Protestantism never had and never can have. The latter has, in its imitation of the ways and words of the mediæval rules of Catholic orders, proved one truth, and I emphasize that because here is the great difference between church nursing and modern nursing. "Clerical care of the sick is destined, under the rules, to serve the Church, whatever that may mean, while serving the sick; the main duties and aims in view are ecclesiastical, and not humane, and, instead of a nurse solely given to the performance of her duties, you deal with ecclesiastical officers" (Virchow). And the necessity is clear, that whatever organization is deemed advisable in the interest of the sick, that organization ought to be in our times *un*ecclesiastical and unsectarian. I have alluded to the fact that whatever medical knowledge existed in the masses centuries ago did so through the medium of the clergy. That knowledge was but trifling, for the ancient medicine of the Greeks and the more recent labors of the Arabs were sealed books at that time. But, then, the clergyman was the doctor. Instead of being so at present, we are daily met with the fact that the exact tendency of modern medicine is an unknown territory to the clergy, and that among them the upholders of all sorts of doubtful practices find their most sincere supporters. Medicine is to them a matter of faith, not science. It is not necessary to refer to that Brooklyn impostor whose criminal career has been detailed but lately in the secular press. For no church and no denomination must be held responsible for his methods of fleecing the ignorant and credulous. But the instances where actual clergymen assume responsibilities beyond their clerical powers and duties are also very numerous, and the protection by the Church of a regular monk in a Jersey monastery, who, in the church of his own institution, plies his nefarious trade of laying on hands, and exorcising the devils of disease for cash, these ten years, proves to what extent faith can be abused and the essence of religion distorted. We still live in a time when mediæval ignorance and modern enlightenment appear to find resting-places side by side. That the latter is getting the upper hand, after all, this sketch will prove, I hope, for even the mediæval organizations in the interest of the poor and sick, which I was anxious to estimate at their full value, have finally failed ignominiously. Almost every large society of the kind would degenerate in the end. The uniform report concerning most of them, mainly the male orders, is this, that with increasing power and wealth the original unselfishness of the founder disappeared, the actual work was left to low servants, the wealth of the community was accumulated in the Church. Thus it was that every great calamity sweeping over the lands was a source of riches to the Church. Never was divine blessing more visible in the Church than when half the population of Europe succumbed under the destruction of the "black-death." Never was more business shrewdness developed by "fathers" and "brothers" than when a patient, sick with leprosy—much less contagious than was made

out by those who had an interest in exaggerating its dangers—had to give up half his property before being permitted to bury himself for life in the out-of-town places provided by the Church. The omnivorous taste and good digestion of the Church have become proverbial.

The majority of the clerical associations having failed, the seventeenth and still more the eighteenth centuries were far behind former periods in regard to systematic nursing. It has taken a long time between the church institutions, which no longer came up to the intentions of their founders, and the spontaneous efforts of free men and women who felt the necessity of appropriate efforts on a different basis. The history of this slow evolution is very interesting ; it is the co-ordinate of the history of a healthy and wholesome individualism in general, after long indifference and chaos.

Schools for training nurses were established in Germany fifty years ago ; in Berlin by Dieffenbach, Kluge, and Gedike, and in Göttingen by Ruhstaat. Books to serve the purpose of instructing nurses and the public in general have been written by numerous men and women, some of them, particularly in our days, by celebrities. Gedike himself published a work, fifty years ago, which is a very readable one even now. Passing by Nightingale, who has proved how to become immortal without enjoying high office, or playing on cannon, or tyrannizing nations, or being borne on a throne, let me allude to but a few illustrious names : Nothnagel, who wrote on the nursing of those sick with nerve-diseases ; Billroth, who published a book on nursing in general ; Esmarch, who taught the first aid in emergencies ; and the greatest of the many great men of the century, Virchow, with his many contributions to the literature of the subject, and mainly, in 1869, with a lecture " On the Instruction of Women in caring for the Sick outside the existing Ecclesiastical Organizations."

This instruction of women in caring for the sick, and the relation of women to nursing as a profession, can be considered from two distinct points of view : first, in its influence upon them ; second, in its effects upon the public.

The first consideration is a very important one. The opposition to women stepping out of their sphere, which was meant to be cooking and washing, knitting and darning, begging alms and taking a daily whipping, also getting married and raising a family, has been overcome by common sense and habit. Common sense ceased to understand why or how every woman could or should cook and wash, knit and darn, beg alms, or get whipped or married. And habits are formed and reformed with such rapidity that opposition becomes changed into favor in a few years. It is but little more than a dozen years since women physicians were recognized by the profession ; not over half a dozen years since you heard of women lawyers. The female part, and, for that matter, the male part of my audience also, are sorry they heard so much of a

woman lawyer in a Western town. At all events, the opposition to the attempt at widening woman's sphere, or spheres, has ceased, and the recognition of the principles of equal rights, no matter for what color or sex, or previous servitude, is all but universal.

You will not care to go into the question now, whether law or medicine will ever be resorted to by women to any great extent. The entire liberty given them has proved already, will prove more in future, that neither law nor medicine is an appropriate vocation for any but an exceptional class of women, and that the opposition to women practitioners of law and medicine will come less from the professions than from the public. For the public will never admit that a person in the practice of a profession should not give his or her entire attention and strength to it, and the women of the country will never admit that the superintendence of a home and the proper raising of a family are not sufficient employments of all the time and all the powers of the most gifted woman. The amateurs are losing ground. Thus it is that the professions will never be overrun, and the fear of undue competition has long died out, even among the most chicken-hearted braves of the professions. But the question is not how many women will avail themselves of the opportunities granted, but whether they shall have those opportunities, and whether these shall be given the women of all walks of life, of all standards of intellect. And the question has generally been answered affirmatively, to such an extent that it is considered self-understood that, while the mediæval ages attempted to help them as much as possible, modern times prefer to give them the power to help themselves. In regard to nursing, attention was called early to the unmarried and poor among the women. The statistics of Berlin, of the year 1872, proved that every third woman had to provide for herself. It was remarked with surprise that, of 407 such helpless and breadless creatures, but a single one went into nursing as a business. In other Continental cities it was still worse. In Vienna the shiftlessness of women was still greater; misery and poverty reigned supreme, as must be expected when you learn that a woman who took the making of her own clothing, even *with the aid* of a professional seamstress, into her own hands was punishable under the law.

The proportion of but one nurse to 407 women, who had to work for a living, is remarkable, it is true. For are not nursing, and caring, and attending implanted in woman's nature? What is the reason that so few went into nursing as a business, if not a vocation? Probably, because the women felt, or the public made them feel, that without careful preparation no nurse, or *soi-disant* nurse, can be efficient. We have still the remnants, I fear numerous ones, of that self-made class of nurses among us. In my own recollection of far-away years I remember a great many, and a great many, I was told but lately, remember me also, perhaps too well. Some of you may have seen

them—in other people's houses—wrinkled prematurely, thinned out by temper, contrary by nature, or for the most part fattened in the course of their (to them) useful career, complacent, and drowsy while everything was going well, incompetent and snappish when danger required work and sufficiency, always ready to have their regular meals served up-stairs by the help of the house, who breathed freely when they finally left, and always willing to spend their time between rocking a baby, speaking of their long experience, sleeping ten hours, talking gossip all day long, and drinking eleven cups of coffee in the twenty-four hours. This is hardly an exaggeration, for the number of women who took up nursing as a business, driven to it by some natural disposition, gifted with some intellect, modest and willing to profit by superior knowledge and experience, interested in the welfare of their patients, and never stunted in their human feelings by the force of habit, was rather small. But I am glad to say I knew such, too. I gladly shook their hands when I happened to meet them on a common errand, gladly recognizing the diploma they carried in their brains and hearts. But these exceptions proved the rule, and the rule conveyed no blessing. It was, it is, a sad fact that nursing all over the world grew worse in just the same time when medical science grew more exact and medical practice more effective.

Relief in this city came none too soon. The president has detailed to you the history of the training-schools of New York. Since their time the practice in hospitals and in private dwellings has changed wonderfully. After thirty years' work in the city, after twenty-five years' constant labor in public institutions, I ought to know the difference. And I do know and publicly proclaim that the results of the best of physicians have vastly improved since their cases have been in the hands of trained nurses. This is so in private dwellings ; it is the same in hospitals. In the hospitals the difference can be measured on a large scale. In them the trained nurse has worked a vast improvement.

Every large hospital ought to perform a double duty. It must give the poor patient, and many rich also, the best possible chance of recovery from sickness. It can afford to accomplish that, because of its pecuniary and intellectual means. Though a hospital be poor, there ought to be, there generally are, means enough to fill all the necessities required. And the intellectual means are expected, are supposed to be, above the average of the general practitioner. There are a great many reasons why that should be so, why hospital places should be open for the competition of the best material among the medical profession, recognized to *be* the best by the medical profession *itself*, and why family and personal influence should not fill places which are better not filled at all than with indifferent or bad material. A hospital must also grant the best possible nursing—attached, wakeful, careful. All this is due to the single patients.

A good deal more, however, is due to the public at large. A hos-

pital looking for the interest of the single patient only might just as well be a private institution, a *maison de santé* for the benefit of a landlord. The benefit derived from hospital treatment by a sick person is not all the satisfaction due to a public who pay four hundred dollars a year for every bed. Nor are the public paid sufficiently for their sacrifices by the accumulated experiences of a few physicians, who enjoy the large field of observation and the opportunity of utilizing it for the benefit of private patients. Every hospital which neglects to increase the stock of medical knowledge, and to give an opportunity of learning the theory and practice of nursing and caring for the sick, performs its duties but half, and serves the public but incompletely. Every large hospital must be, and will be, a clinical school, and a school for nurses. It will be acknowledged that as the presence of a nurse in a sick-ward, who is sent there to learn, is considered unobjectionable, the presence of a few physicians observing a case, which can not be injured by their so doing, is not only not injurious, but ought to be demanded by the public, who have a right to expect a physician in their own families who has seen and knows and understands what he is called in to treat. I do not see why hospital patients only should have the best money and service can afford, and why the public at large should have to fall back in many cases on untried skill. Thus the people have a right to demand that every large hospital should have a clinical school, and a training-school for nurses. The public, who are willing to pay for it, may also demand that the expenses of the same, particularly the nurses' school, should be borne by the hospital. This demand, if considered theoretical only, must stand as long as a hospital is, or claims to be, a public institution. When the board of directors of any institution will recognize that they are not the administrators of the dollars of a small concern, but the benefactors of the public at large, they will also appreciate not only that a few disinterested ladies will open their pocket-books, and collect voluntary contributions, but that a generous public will pay more willingly and more largely.

The demand that a large hospital should be a clinical school and a school for nurses, and that the expense should or might be borne by the institution, is not valid in the case of city or commonwealth hospitals only. Most of the hospitals of the country are originally private institutions. They obtain the character of being public affairs when an always increasing number of men and women become interested in and contributors to them. An institution with one or two thousand paying members represents ten or twenty thousand families —in fact, represents a city. And what it represents, of that it assumes the rights and duties. And the main duty the public at large will soon know how to enforce from the directors of every large hospital is, to administer the public domain to the greatest possible advantage for the greatest possible number. The selfishness of an individual adversary, the animosity of evil-spirited persons will never weigh,

ought never to weigh, against the public good ; the latter only is the object of those who are placed in trust of money, institutions, and the public welfare, because of their actual or supposed public spiritedness and superior intellect.

Is it necessary to detail the advantages of the services of a trained nurse over those of an untrained one? The latter class, as a rule, brings to their work no previous education, no theoretical schooling, no technical experience. They come mostly from inferior walks of life, with less intellectual power, and less moral force. Only those who come from better stock, and raise themselves to higher ambitions, will spend money, and two years of their lives, for the purpose of learning both theoretically and practically the art of relieving the sick, aiding their comfort, taking responsibilities which sometimes are as difficult as they are life-saving, and obeying orders with intelligence and understanding. That such persons are valuable additions to our hygienic requirements and sanitary progress everybody can conceive. That without them many a case would not recover, in spite of the most competent medical skill, all of you may have experienced. I, for one, know from personal experience that many a case can be, has been saved, first by the medical orders ; secondly, and often mostly, by the execution of orders, such an execution as is rendered possible by combined knowledge and skill only. If I say that we practitioners have commenced to feel safe in regard to many of our cases only since we could rely on the co-operation of a trained nurse, I express but a common observation. I trust that there are households within hearing which know how to appreciate the services rendered them by a trained nurse.

So much only in regard to individual cases. But the service to the public at large hitherto rendered, and constantly increasing, is of a different and still more important nature. Who is nowadays the teacher of the public at large in sanitary matters, in hygienic rules? The knowledge of the Church, when *it* nursed, was faith, and, let us add, in its best times, love. The knowledge of uneducated women was, and is, ignorance driven to actual or alleged work by starvation. The knowledge of a trained nurse is the result of a two years' study under competent teachers, and a constant practice. Who in the community is her superior in the knowledge of the facts mostly necessary for the health and life of your children, and dear ones in general? The clergyman is no longer the teacher of the mysteries of life and common sense. The schoolmaster or schoolmistress knows about the classics, geography, and arithmetic, but no normal school ever taught them the elements of applied physiology. The educated member of any profession except the medical has not the slightest idea of the necessities of the body, the action of food, the effect of clothing, and the hundred facts required by different ages, conditions, and states of health. With the exception of the physician, whose advice is frequently sought only

to repair the effects of ignorance, the only teacher the public have, and will have, is *the trained nurse.* Ten or twenty families may enjoy her presence annually, ten or twenty mothers will learn simple and important truths, knowledge will increase, and prevention of disease will become a possibility. Enjoyable and useful as the service of a trained nurse is in an individual case of sickness, her services to the community are very much greater, by virtue of her theoretical and practical teaching. May I tell you what a good trained nurse may teach, and can teach ? How to recognize a fever, how to compare the local temperatures of the several parts of the body, and how to equalize them ; she knows that ever so many feeble children might have been saved, if but the feet and legs had not been allowed to get cold ; how to bathe, when, and when to stop ; how to regulate the position of the head—I remember quite well the case of inflammatory delirium which would always be relieved by propping up the head—how to treat intelligently an attack of fainting; how to render cow's milk digestible by repeated boiling, or lime-water, or table-salt, or farinaceous admixtures ; how to feed in case of diarrhœa ; how to refuse food in case of vomiting ; how to apply and when to remove cold to the head ; how to ventilate a room without draught ; and a thousand other things. She will also use her knowledge and influence in weaning the public of nostrums, concerning which hardly anything is known except what you have to pay for the promises of the label. She will break the public of the indiscriminate use of quinia, with its dangers possibly for life ; cure you of the tendency of making the diagnosis of malaria the scapegoat of every unfinished or impossible diagnosis ; she will teach you that the frequent and reckless domestic use of chlorate of potassium leads to many a case of ailment, to chronic poisoning, possibly in the shape of Bright's disease or to acute poisoning with unavoidable death. These are but very few of the things she can do, and but a little of the knowledge she can not but distribute. With the aid of the class of women who frequent our training-schools, the public at large must and will gain, in a short time. Let the number of the schools increase, and increase the number of pupils, and every one of them will be a teacher and an apostle of sound information on sanitary and hygienic subjects. And let nobody leave this place to-night without intending to aid an institution as helpful as this.

Will the pupils come? Certainly they will. There is an increasing demand for their services. Many times had I to wait a day or two before any of the schools could accommodate me. There is no fear that there ever will be too many good nurses. There is fear, either, that many persons of inferior intelligence and morals will present themselves for or obtain admission to a school. By attending the suffering, it is true, many a crude or brutal nature is ennobled ; but I should not advise to run the risk of admitting that class at the expense of the sick, or of a rising and beneficent profession. The occasional specimens of

cold-hearted and arrogant persons one is apt to meet, even among trained nurses, must discourage the admission of any but the very best. These *will* apply. The calling is an honorable one, it promises a competence, it corresponds with the innermost nature of woman. It is not true that the Church alone could raise the enthusiasm for hard work, the performance of arduous duties, and self-sacrifice. One of the first nurses I had in my division in Bellevue Hospital, many years ago, was an accomplished girl, the daughter of a rich man in the far West. After a year and a half it took all the influence and begging of her family to take her away from us and her hard work among the poorest of the poor. The large number of ladies, wealthy and accomplished, who work assiduously and regularly under Felix Adler, and in other places, under our very eyes, prove that the very best class of society can be prevailed upon to do the hardest and most beneficent kind of work. And the fact that the *élite* of the women of the city are willing and anxious to undertake the arduous task of founding and supporting training-schools, in the face of all sorts of difficulties, proves also that the work is in accordance with the requirements of both woman's nature and humanity. There will be many trained nurses who will work for humanity's sake, as centuries ago they claimed to serve for God's sake. Many a woman who would have buried herself in a monastery centuries ago, driven from the face of the living earth by misunderstood and unsatisfied longing, I believe, would nowadays become a nurse, knowing and enthusiastic.

Ladies of the graduating class : The remarks I was expected to make have extended into a lecture. You have been used to lectures, however ; if you had not enjoyed them, and profited by them, you would not be here to-night, the most honored and most conspicuous of this assembly. Thus I thought I might be permitted to speak, instead of to you, of you, and your chosen calling and its history. From nothing can any profession derive so much advantage as from the history of its development. It is certainly an interesting spectacle to see how your profession depended intimately on the changing conditions of thought and feeling among mankind. You are happy enough to live and work in a time when, while following individual tastes and having individual motives, your labors are given to the suffering for no outside reason, no church command, but from the free choice of free women in the interest of humanity. I had also to allude to several subjects which may to some appear a little outside the legitimate domain of your ambition and duties. You know better. An intelligent woman will not spend two of her young years in acquiring a certain knowledge without enlarging her horizon in general. You have chosen a profession as noble and as deserving as any there is in existence. You will be the interpreters and right hands of the physician, and the connecting link between the physician and not only the single patient, but also the public at large. My opinion

of the services you can render is high, but I trust not exaggerated. When your numbers shall increase, and the character of those who are admitted remain of the same standard, your importance will grow. In your hands will, to a great extent, lie the opportunity for removing prejudices, spreading knowledge, healing and preventing disease. Even those of you who will not always consent to serve in *other* people's homes, will, by example and by teaching, remain in close alliance and co-operation with such as intend to remain in the ranks forever. As you now mean to leave us, endowed with the certificate of the required accomplishments, I can only add, while offering my best wishes for your future, that I trust you will never forget the place which gave you so ample opportunities for perfecting yourselves. You will never forget the gentlemen who taught you, nor that accomplished young woman who impressed all of you with the fact that the charms of womanhood will not suffer from hard work, from a classical education, and thorough medical or other knowledge. Do not forget, also, at the beginning of your independent career, the ladies to whose care and sacrifices and labors you owe the existence of the school which sends you forth as its first graduates, nor the great charitable institution which, after having given you your practical training, hon ors you to-night by the presence of many of its officers, and designates its president to deliver to you your diplomas.