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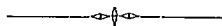
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*terumah*, an offering to Jehovah, that he might be free from plague when he approached Jehovah's presence, and, at the same time, might have his part in the atonement for souls, and so be remembered in the sight of Jehovah.

The secret of the unfathomable love of the Trinity—that Christ, the Son of God and Son of Man, would, in the fulness of time make atonement by His own life poured out on the cross, and presented before His Father's presence in heaven (the ideal *kapporeth*) for the sin of mankind—was, when Jesus came, hidden from the Israelite; but it formed the real background for the sanction in the law of animal sacrifices, whereby they acquired a typical signification, so that they set forth, in shadow, that atonement which God from all eternity, in spite of man's fall, had determined to effect by giving up the only Son to death, as a sin-offering for the whole world.

ROBERT HELME,

(To be continued.)



#### ART. III.—NURSING.<sup>1</sup>

MRS. SAIRY GAMP carried a large bundle, a pair of pattens, and a gig-umbrella. She was a fat old woman, with a husky voice and a moist eye. Her face—the nose in particular—was somewhat red and swollen, and she exhaled a peculiar fragrance with her breath, suggestive of a dirty wine-vault. She wore a rusty black gown, rather worse for snuff, and a shawl, and a large poke-bonnet to correspond. Mrs. Gamp was choice in her eating, and repudiated hashed mutton with scorn. She required for supper pickled salmon, cowcumber, new bread, fresh butter, and a morsel of cheese. In her drinking, too, she was very punctual and particular, requiring a pint of mild porter at lunch, a pint at dinner, half a pint as a species of stay or hold-fast between dinner and tea, and above all, a pint of celebrated Stafford ale, or real old Brighton tipper, with her supper of pickled salmon and cowcumber—besides the black bottle on the chimney-piece for occasional refreshment. Mrs. Gamp was not a Rooshan, nor yet a Prooshan, and consequently would not permit anyone to supervise her nursing duties, which she termed setting spies over her. Mrs. Gamp had two friends; one a Mrs. Harris, whom no one ever saw in the flesh, and

<sup>1</sup> In continuation of "Hospitals" in the February CHURCHMAN.

another Mrs. Betsey Prig, who was scarcely so stout as Mrs. Gamp, but in other respects very similar. Mrs. Gamp having been engaged to attend one patient, immediately agreed to take part of Mrs. Prig's duty, who was engaged to attend another; and this unbeknown, for she would not deny she was a poor woman, and that money was a hobject. "Anything to tell afore you goes, my dear?" asked Mrs. Gamp. "The pickled salmon," Mrs. Prig replies, "is quite delicious." "Don't have anythink to say to the cold meat, for it tastes of the stables. The drinks is all good. The physics and them things is in the drawers and mankleshelf." Added Mrs. Prig cursorily: "The easy chair ain't soft enough; you'll want his piller." So, having topped her supper with a shilling's worth of gin, Mrs. Gamp took the patient's "piller," coiled herself on the couch and went to sleep. When the patient in his delirium caused her to awake, Mrs. Gamp shouted: "Hold your tongue! Don't make none of this noise here!" When in due course relieved by Mrs. Prig, Mrs. Gamp said: "He's rather wearin' in his talk, from making up a lot of names; elseways you need not mind him." "Oh, I shan't mind him," Mrs. Prig returned; "I've something else to think about."

Now the question arises, Is the above overdrawn? Our recollection of nurses, extending over some half century, leads to the belief that there is little exaggeration. We should be glad if we could believe that the types of nurse depicted by Dickens were as mythical as Mrs. Harris herself, and that we could say, as Betsey Prig exclaimed, in her memorable quarrel with Mrs. Gamp: "I don't believe there's no such person!" Times, however, are happily changed, and the Gamp and Prig style of nurse is as extinct as the dodo. We could not now be content with the old order of things, and since we have realized something better, we wonder, as Bacon observed, "that it was not sooner accomplished." If we contrast the nurses of the present day with those of former times we find every reason for gratification. Instead of snuffy old parties we have cleanly and comely women. In lieu of gin-drinking harpies we have temperate persons. We have discarded bundles, gig-umbrellas, and poke-bonnets for neat, modest, serviceable uniforms, a series of which was displayed some time ago under the auspices of Mr. Burdett at the Charing Cross Hospital. Above all, we are now able to place our sick in the care of nurses to whom every confidence may be accorded; who, we may be certain, will do the best they can for their patients; and who, we may be sure, would rather deprive themselves of a "piller" than take it from the sick person. And here Miss Nightingale must be mentioned, with the utmost respect and sympathy, as the pioneer of the new

order of things. We really thought that everyone now recognised the meaning of the word nurse as one who had been trained to the duties of nursing. A certain Board of Guardians appear the last to have discovered this, for they recently required a competent, but not a trained nurse! which the *Nursing Record* rightly condemned as "inconceivably silly."

During all ages human beings have run to extremes, especially when, as Horatius observed, "people are led away by the semblance of what is right." Fashion has also exercised its potent sway. Thus we have had many persons taking to nursing who were totally unfitted for such an avocation. Offers have poured in as quickly as circulars from dressmakers after the announcement that a "marriage has been arranged." But infatuations end in bitterness and disappointment. Parson Primrose never disputed his wife's ability to make goose-pie, but he did her power of argument, on which she rather prided herself. Vain visions are one thing and success is another. To secure success many and high and rare qualifications are necessary in the nurse. In the first place, she must not be too young; for many young women are, metaphorically speaking, mere electric jars charged with emotions. No woman should commence nursing until twenty-three years of age, at least. Neither must a nurse be too old, for nursing is fatiguing, and with advancing years much of the elasticity of life naturally departs. It is found from experience that nurses should be superannuated when they are barely past middle age. This has been recognised by the promoters of the National Pension Fund for nurses—among whom Mr. Burdett stands prominent—which ensures that nurses joining the fund shall not be entirely destitute when unfit for work. The British Nurses Association have also devised a scheme for pensioning nurses. There is an exception to every rule, and so there is an exception to the rule that competition is healthy. The exception is the establishment of two pension funds for nurses. In this matter rivalry is not wanted, and we would hope for amalgamation of these two competing associations.

Although nurses in hospitals are not required to perform the menial work which was formerly imposed upon them—such as scrubbing floors, carrying heavy weights, etc.,—still they must possess at least the average degree of physical strength. There is reason to believe that many nurses are worked much too hard. Fourteen hours a day is the time some nurses are expected to be on duty. In a lecture recently given before the Hospitals Association, Mr. Burdett stated there are some homes and hospitals which work their nurses regularly for fourteen hours, a practice which is unjustifiable. Such a

period on nursing duty implies too great a strain. Mr. Burdett also commented on the food supplied to nurses in public institutions, which, although abundant and varied, required better culinary arrangements. It was also suggested that wealthy governors of hospitals might provide for nurses occasional facilities for excursions into the country during the summer months, and in the winter now and then place a box at the Albert Hall at the disposal of the jaded nurses who keep the great hospital machine going. Ladies, too, who have pleasant homes in the country, or at the sea-side, might render valuable service by acting on the plan suggested by Miss Hicks, of the Great Ormond Street Hospital for Children, and inviting a nurse from time to time to stay with them, and thus enable nurses to enjoy much-needed rest and change of scene. Very recently the editor of the *Provincial Medical Journal* asked when another Hood would arise to write us a "song of the nurse." Mr. Burdett appears to have taken up the rôle in which he is well versed, although preferring expression in prose rather than in poetry.

Again, no one should undertake the duties of a nurse if there is suspicion of hereditary malady such as consumption, cancers, insanity, etc.

Idiosyncrasy must also be studied. Some persons are violently affected through one or other of the special senses. The odour of a flower even may induce fainting. The poet scarcely exceeded his license when he wrote of those who "die of a rose in aromatic pain." There are people who cannot remain in a room with a cat. There are others who cannot stay in a room where there is ipecacuanha powder. There are others much affected by quinine. There are more who cannot endure to witness suffering or to see blood. To witness an operation for the first time always causes anxiety and nervousness even to the most callous and self-possessed. And as is the case with some naval men who never thoroughly get over seasickness, so there are those who never outlive their antipathy to the sight of blood. Peculiar idiosyncrasies of many kinds unfit a person for nursing the sick. A nurse should also possess the rare gift of sympathizing without maudlin sentiment—for sentiment is not sympathy. In sympathizing with the sick, the heart must never take the lead of the understanding. The great oriental law-giver Menu said a female is able to lead not only a fool, but also a sage into subjection. And this is especially the case with the sick when a nurse is truly sympathetic, "for companionship doth woe assuage." But the nurse must be friendly and sympathetic without being familiar. With some people nothing lessens trouble so much as talking about it; with others it is the reverse. The nurse

should not lose sight of this ; she should be able to appreciate when sympathy, as is sometimes the case, would be misplaced, and when she may with advantage assume an approach to the rôle of a domestic Nemesis. But in all cases cheerfulness and brightness are required in the sick chamber. When the sick person asks plaintively : " Canst thou not cleanse the stuffed bosom of that perilous stuff which weighs upon the heart ?" although the nurse may know that it is not in her power to do so, it is not well to assure the patient of the fact. Even under such distressing circumstances the melancholy air which may be expected in the face of one, who, like Hamlet, thinks the world out of joint, must be studiously avoided by the nurse.

A nurse must scrupulously abstain from showing prejudice. It has been said that a person without convictions and prejudices is a person destitute of identity and force of character.

I do not like thee, Dr. Fell,  
The reason why I cannot tell,

is a feeling not unfrequently experienced with regard to others as well as doctors. We are certainly told to love one another ; yet, try as we may, we cannot always free ourselves from oftentimes unaccountable, and perhaps irrational, likes and dislikes. But likes and dislikes should never be evidenced towards patients. There must be no favourites. Sick people are hyper-sensitive and querulous, quick to take umbrage when no offence is intended, and ever ready to discern and resent partiality in the nurse's conduct. Neither must a nurse resent prejudice towards her on the part of a patient. Illness often renders people unjust and selfish. Like an internal shirt of Nessus, illness raises one continual blister over the whole moral epidermis, and antipathies are sometimes conceived by the sick which return to health dissipates.

Sophocles tells us : " Whoever is known to requite a favour must be a friend above price." Dionysius observed : " The gratitude of some men is for favours to come." The Italian proverb says : " Obligations which do not admit of being fully discharged are often repaid by ingratitude." When Don Quixote rescued the galley-slaves, they rewarded him with stones, and stole his squire's ass ! Ingratitude has always been a failing of poor human nature, and there is nothing unusual in men falling out with what is done for their benefit. A nurse, therefore, must not expect gratitude from patients. Of course, there are brilliant exceptions ; but in this respect the nurse participates in the general position of the medical attendant. Too frequently the feeling of the patient is :

He only did it for his dirty fee,  
And not for any love of you or me.

A nurse also requires strength of mind suitable for a position in which the ghastly realities of disease are always prominent. Seneca advised: "As often as thou engagest in any enterprise, measure thyself with those things to which thou addresseth thyself"—an aphorism which should be taken to heart by the would-be nurse. She may be obliged to deny the strong wishes of a patient, often a painful procedure. She may have to control and soothe the delirious, and she must be prepared for any phase delirium may assume. The countryman may babble of green fields, and the citizen may rave of the haunts of vice; the soldier may fight his battles over again, and the classic may be back on the sands of Troy, with white-crested Olympus towering in the distance; and many in delirium may disclose secrets better unrevealed. At any period a nurse may be called upon to evidence physical strength and presence of mind above the average.

Again, when the doctor leaves the house and the patient lies *in extremis*, the nurse's duties are still not ended, for she has to attend till death takes place. Notwithstanding that there is an innate shrinking of dust with the breath of life in it, from dust from which the breath of life has departed or is departing, the nurse must rise superior to such feeling.

A remark was made above that during delirium secrets may be disclosed which were better unuttered. This leads us to reticence as a desirable attribute of the nurse. A nurse may well remember what Polonius said to Laertes: "Give thy thoughts no tongue!" A sick person when not delirious is often unwilling to talk, and excitement always does harm. Asking unnecessary questions, even if sympathizing ones, should be avoided; and whispering should be refrained from, as likely to excite distrust and suspicion in the mind of the patient. Above all, the nurse should never discuss the ailment of the patient with him, or recount circumstances of similar or other illnesses. Neither should she discuss the medical attendant with the patient or his friends. Plato in the first lines of the "Phædrus" apostrophizes the cricket-like song of the cicada as "charming, sweet, and harmonious"; and Xermarchus called them blessed, because, "Happy cicadas, thy females have no tongue!" But we do not require nurses to emulate the silence of the female cicada. There is a great difference between reticence and talkativeness; but the nurse must learn when to talk and when to be silent.

It is correctly stated that a little knowledge is a dangerous thing. But a nurse must possess a certain degree of special knowledge. Although being under the supervision of the

medical attendant, it is neither necessary nor desirable for a nurse to drink deeply from the fountains of medicine and surgery. Still, she must be familiar with the use of the clinical thermometer, and she must know how to count the respirations and the pulse. Experience will teach her the prominent symptoms of ailments. She must know how to bandage, how to change the patient's clothing and bedding, and how to change the patient's position in bed. Also when an upright posture might be dangerous. The nurse must also know how to dress herself for her duties. As regards dress it has been previously mentioned that nurses are now clothed in uniform. But uniform may not be all that is essential. It is quite possible there may be a uniform which admits the objectionable items of rustling garments, streaming ribbons, and creaking shoes. We have heard of such a circumstance as a nurse choosing that institution which permitted the most becoming costume. But the daintiest uniform does not always denote the most pleasing work. At a provincial hospital there is a uniform of light blue zephyr, with holland fawn-coloured apron, which contrasts so well that it creates a feeling of envy, until it is known that it is the dress of the nurses of the fever hospital, doubtless adopted for special reasons. It has been observed that "no woman ever considered herself unfit for becoming attire," and that "devotion in women is never more sublime than when they are enduring the tortures of their dress." But the nurse's dress should not torture her. And it may be becoming without being conspicuous, as was demonstrated at the Charing Cross Hospital exhibition before referred to. Nursing is not a drawing-room qualification, but a life-long avocation, and for a nurse we do not want "a splendid angel, newly dressed, save wings for heaven."

Patience is a virtue which is decidedly necessary in the nurse. She must ever remember that sick people are querulous, and that each thinks his own disease the worst and most remarkable that was ever endured by poor humanity. And in whatever shape evil comes, the sick are apt to exclaim: "Take any form but this." A nurse who possesses qualifications as above is not likely to show pride. Pride is a garment all stiff brocade outside and all grating sackcloth within. Pride leads to quarrels, perhaps the more virulent as they arise from trivial causes. Johnson said to Goldsmith: "Consider, sir, how insignificant this will appear twelve months hence." And most quarrels do appear very foolish after a lapse of time. We do not want people as nurses who "have not been used to this kind of thing." Neither do we require those who, like most amateur actors, are only contented with playing the most important rôle. In such qualifications as



above modesty forms an essential part. The nurse may remember that it has been said: "Modesty is a handsome dish-cover, that makes us fancy there must be something very good underneath it."

Obedience is a virtue which nurses must cultivate. Discipline is as necessary in the sick-room as on the parade. The nurse must remember that she is not there to diagnose the case, or to discuss the treatment, but to detail the symptoms to the doctor, to leave him to draw his own conclusions, and to carry out his directions. If a nurse wishes to do her duty she must in the doctor's absence use all her senses to detect anything that can add to his knowledge of the case. But it is not her business to suggest, nor to talk about the treatment to the patient or his friends. With all this there must be a stern sense of duty, which is not a thing to be measured by line or rule. The nurse must ever remember that the demands of duty are more inexorable than those of inclination. The midnight hours must be otherwise spent than in chasing glowing time on flying feet. "The daily round, the common task," must take the place of amusement. The nurse's sense of duty must partake of that which fixed the Roman soldier at his post, when the boiling deluge swept a population before it and engulfed Pompeii in the sea of fire. If there is this sense of duty there will be determination to succeed. The nurse should take Sheridan's advice how to secure success: "The surest way not to fail is to determine to succeed." And she may recollect as encouragement, that all is not lost because one false step has been made. Everyone is liable to make a mistake. In the "Iliad," Vulcan is married to Venus, in the "Odyssey" his wife is one of the Graces. Experience is a hard taskmaster. But "the reason calm, the temperate will, endurance, foresight, strength, and skill" must prevail. There is, however, no reason, but quite the reverse, why the nurse should over-act her part, as some have done from anxiety to succeed. The man who blacked his body as well as his hands and face when going to play Othello did not portray the Moor any better than he would have done had he not blacked his body for the occasion. Agnodice, the Athenian virgin, desiring to learn the art of medicine, cut off her hair and dressed in male attire in order to achieve her purpose. There is, however, no necessity for those desirous of becoming nurses to proceed to extremes. Everybody is anxious to assist in the development of nurses. There are training schools for nurses at most hospitals, and various books have been written for the benefit of nurses. Among such recent literature may be mentioned "The Theory and Practice of Nursing," by Dr. Lewis; "A Manual of

Nursing, Medical and Surgical," by Dr. Laurence Humphrey ; "Minor Surgery and Bandaging," by Mr. Christopher Heath, and "Domestic Medicine and Surgery," by Dr. Spencer Thompson. For tropical countries there is Sir William Moore's "Manual of Domestic Medicine and Hygiene." And there is the *Hospital Nursing Mirror*, being the extra nursing supplement of the *Hospital* newspaper, in which lectures on nursing have been lately published. There is also the *Nursing Record*.

To ladies who intend making nursing a profession a late writer said: "Do not undertake the work with any romantic ideas of being a ministering angel moving about the wards in a very becoming hospital dress, and followed by loving looks and murmured blessings from grateful patients. The reality turns you into a hardworked, weary, worn, and often sorely-harassed woman." This we fully endorse. As before observed, Nursing is not a drawing-room accomplishment, but a life's vocation. Pleasures must be put aside for work, hard, painful, and often repulsive. The popular idea of a nurse, sweet, sad, and sentimental, but removed by the seriousness of her vocation from the pleasant frivolities of life, is scarcely more like the reality than the midnight sun glimmering faintly over the North Cape resembles that which blazes above the Sahara. A Roman woman of the best type was depicted as virtuous, high-minded, skilful, self-confident, yet truly feminine. It is only this class of women who can fulfil satisfactorily the duties of a nurse. A writer in the *Hospital*, herself a nurse, has mentioned the following as what a nurse should be :

Active, attentive, alert ; brave, bright, businesslike ; calm, cheery, comfortable ; docile, diligent, decided ; energetic, enthusiastic, even-tempered ; faithful, fearless, far-seeing ; gentle, good-humoured, generous ; healthy, hopeful, humble ; improving, intelligent, indefatigable ; joyous, judicious, just ; kind ; loyal, liberal-minded, light-footed ; merry, managing, modest ; neat, notable, nice ; obedient, orderly, an optimist ; prompt, patient, painstaking ; quick-sighted, quiet ; ready, reliable, resourceful ; sympathetic, systematic, self-forgetting ; truthful, thorough, temperate ; unprejudiced, unassuming, uncomplaining ; vigilant, vigorous ; wary, warm-hearted, well-informed ; young in years and heart.

From all that has been said, it will be evident that every woman is not fitted to be a nurse. It was recently remarked in a medical journal that it would be a real gain to society if the knowledge possessed by the trained nurse were made part of the education of every accomplished woman. "Such a knowledge would be worth a score of ologies in many a dark hour of domestic sorrow." But, however desirable this may be, it is impracticable.

One science only can one genius fit,  
So vast is art, so narrow human wit.

A fitting conclusion to this article will be the mention of the fact that through the exertions of the Marchioness of Dufferin, Lady Reay, Lady Roberts, Lady Lyall and others, a nursing system has been established for both civil and military hospitals in India, where so many of our friends and relatives are located; especially as the writer, in his book entitled "Health in the Tropics; or, Sanitary Art applied to Europeans in India," published so far back as 1862, strongly advocated this movement. It was then proposed that an officers' hospital should be built near every large military or civil station, to which a European nurse should be attached.

The advantages of such a plan would be manifold. At the present time the sick bachelor officer lies in his bungalow dependent on the kindness of his comrades, and on the oftentimes lazy attendance of his native servants . . . and he is dependent on the mess for his sick wants. Should he become delirious or helpless, he must either be left to the care of natives or become a tax on the kindness of his brother-officers, who, to their credit be it said, are ever ready to feed, tend, wash, to sit up with him—in fact, to act as nurses. This, however, should not be. A man cannot perform the office of a nurse.

Thanks to the exertions of the ladies mentioned above, to be an invalid in India has now become a much less trial than formerly for all classes. Lastly, with reference to a statement which has been "going the round of the press," that arrangements have been made at Aldershot for soldiers' wives to undergo a course of instruction in nursing, it may be remarked that such a system has been in operation in India for some years past.

WILLIAM MOORE.



#### ART. IV.—THE GENUINENESS AND AUTHENTICITY OF THE BOOK OF DANIEL.

##### PART I.

**A**N earnest student of the Bible must be in some sense a critic. When a man is deeply impressed with the importance of his spiritual interests, he has recourse to that book which professes to be "a lamp unto his feet and a light unto his path"; and he cannot read the marvellous revelations disclosed on those sacred pages without examining their claims upon his reason and his conscience. What evidence of the truth of these things is forthcoming? What testimony can they summon in their support? What external proofs can be produced? and what corresponding echoes of internal evidence testifying to wants supplied corroborate their demands? Such questions press for a reply. But to be a true critic the