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FLORENCE NIGHTINGALE

BY

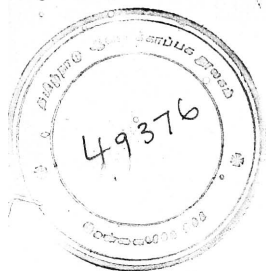
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PREFACE

It is a remarkable fact that of all the books written up till now about Florence Nightingale, one only, Sir E. Cook's Life, has any claim to authority. Miss Nightingale's habit was to shrink from publicity, she never made any attempt to give the world her own reminiscences, nor did she commission any one else to write about her. Innumerable accounts of her life have been published, which had no sanction whatever from her or her family. Most of them consist of mere anecdote, many contain unfounded guesses, or even actual misstatements, and all tend to concentrate the attention of the reader on the two years spent in the Crimea to the exclusion of other periods of work.

After Miss Nightingale's death her family invited the late Sir E. Cook to write her life, and his two large volumes contain a complete and authoritative account of it.

The present sketch has been written by one of those cousins of Miss Nightingale who was concerned in the production of Sir E. Cook's biography. As a younger cousin she was latterly closely connected with Miss Nightingale's daily life, and was familiar with her views and opinions. She also knew India, the object of so much of Miss Nightingale's thought and work, having lived there for several years. It thus came about that this book was written in India, and specially intended for readers in India, to whom it is now presented.

D. J. S.

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FLORENCE NIGHTINGALE

I. EARLY YEARS

It is not possible to give anything like a complete account of Florence Nightingale's life. For this the reader is referred to Sir E. Cook's life. A great deal has been written about her work during the Crimean War, enough to show what it was that she did, and why she won the intense gratitude and admiration of her contemporaries. The work she did after the war was over, has been less well remembered. From her own writings, and from the occasional notices in the lives of her contemporaries and elsewhere, we can get some idea of her activity. She lived a very quiet, retired life, and had a great dislike for publicity and anything like self-advertisement. Nevertheless it was during these later years that some of her most important work was done. The reputation she gained during the war was such as to place her in a unique position of authority in all matters connected with health and sanitation. Public attention had been for the first time seriously awakened to those subjects, and the reforms made then were only the beginning of efforts that have never since ceased. Great improvements began to be carried out in sanitation in many lands, and Miss Nightingale's counsel and encouragement were constantly sought and freely given. She realized intensely the vast amount of misery and suffering caused by illness. In her view, it was one of the greatest obstacles to progress, and she spent her life in fighting against it. It has been truly said of her that she was an enthusiast for health and happiness.

Miss Nightingale's father was an English country gentleman, a man of good family, well-educated, fond of reading and of foreign travel. Her mother was the daughter of Mr. William Smith, a member of Parliament, well known in his day as a man of liberal opinions, and one of a group of men

to whose efforts was due the abolition of slavery in British Colonies. Mr. and Mrs. Nightingale soon after their marriage spent some years in Italy, where their two daughters were born. The younger daughter was born in 1820, at Florence, and was named after that place. On their return to England, not long afterwards, the family lived quietly at Mr. Nightingale's beautiful house in the south of England, spending the summer months at another house, in Derbyshire, in a cooler and more bracing climate. Florence and her sister were educated at home, chiefly by their father. Besides modern languages (French, German, and Italian) drawing and music, they learned Latin and Greek, and some mathematics and science—subjects not generally taught to young ladies in those days. They were clever girls unusually well-taught, and brought up among refined and cultivated people. Mrs. Nightingale was one of a very large family, and they had a great many relations and friends. In the natural course of events, the two sisters might have been expected to live prosperously at home in these pleasant surroundings, with plenty of interests and occupations to fill their time, till they married. This was no doubt the wish and expectation of their parents. But Florence had an energy and depth of mind, and a strong wish to make a serious use of her life, which made it impossible for her, as she grew older, to remain contented with this. As the daughter of a landowner, she was early brought into contact with the poor, and led to think of their condition and their needs. Mr. Nightingale's tenants, as usual on an agricultural estate, included, besides the comparatively well-to-do-farmers, a number of labourers, who lived with their families in small cottages, supporting themselves by their work on the farms, for which they received a weekly wage. These form one of the poorest and most dependent classes in England, and their housing, education, and general condition, especially in those days, left much to be desired. The ladies of an English landowner's family occupy a position of importance, and it is generally expected of them that they will interest themselves in the welfare of their poorer neighbours. If they have ability and public spirit, they can often do a great deal

of good. As an illustration of this, the example of Lady Waterford, who was sister to Lady Canning, wife of the Viceroy of India, may be quoted. In 1842, she went with her husband, Lord Waterford, to visit his estate in the north of England. They went into every cottage in the village. 'I never saw people so clean and comfortable,' she wrote to her mother, 'it is quite a treat to see them so.' On Lord Waterford's estate in Ireland, the people were less prosperous. 'No less than six hundred men found employment on the estate of Curraghmore, and it was to improve the condition of her own tenantry and workmen that Lady Waterford's attention was chiefly directed. In her efforts to introduce habits of cleanliness into the Irish cabins, she would often go thither to make the beds herself, to show how it ought to be done, and would give personal lessons in cleaning the rooms. She gave them lime to whiten their walls, seeds for their gardens, and prizes for the best vegetables and most neatly kept houses, whilst supplying their wants in many other ways. To beautify the houses of the Irish poor, as well as to make them more wholesome and comfortable, was one of Lady Waterford's greatest wishes. She had trees planted along the streets of the village, and wished to plant a tree in each corner of the surrounding fields. Amongst those she frequently visited and to whom she read the Bible, was a poor blind girl living on the roadside. For her comfort she designed a special kind of reed chair, drawing a picture of what she intended, and desiring to have it made from her design.' Of another lady, Lady Granville, we find it recorded by her grand-daughter—'She also, as everywhere, was in the habit of going to see poor people in the neighbourhood and assisting them in various ways, generally after some original fashion of her own, for she was never commonplace in anything. It was a great pleasure to us children to be allowed to visit them also, and we early learnt to go and read to the old and blind, and to exercise a little self-denial on their behalf.'

These are examples of the kind of thing that may be done by the ladies of a country gentleman's family for the poor. Mrs. Nightingale and her daughters interested them-

selves like other ladies in the welfare of the tenants on Mr. Nightingale's estates. They knew them personally, and would visit them from time to time, and do what they could to help them in cases of illness and other difficulties. In this way Florence Nightingale began to know what poverty and sickness meant, and to think about helping other people when she was quite young. But she was not content with the mere giving of alms and visiting the poor which most ladies thought sufficient; she began very early to aspire to a life of far wider scope and interest.

Sickness interested her particularly, and she seems to have had from the first a strong inclination towards nursing, and a wish to get a thorough knowledge of it. In those days, however, it was very difficult to get any training. Nursing at that time was not the respectable and well-organized profession that it is now. Systematic nursing had from early times been undertaken by the Roman Catholic Sisters of Mercy—women who had joined a religious order, and had vowed themselves for life to celibacy and obedience to their order, cutting themselves off from family and friends. In certain orders, the sisters visited the sick in their homes, and in others they nursed in hospitals, but they had little special training for the work, and it was not thought necessary that they should understand more than the simple duties of attending to the patients' ordinary wants, keeping the rooms clean and the beds tidy. Skilled nursing of the modern kind was not thought of. Nursing was regarded merely as a meritorious way of exercising charity. The scientific care of the sick was regarded as being entirely the doctors' affair; it was not understood that illness could be not only mitigated but actually cured by skilful and intelligent nursing and that this is quite as necessary as medical knowledge.

In Protestant countries there had been for 300 years no religious orders to undertake the work of nursing, and the work in the hospitals had been done by women of a very inferior class. They were in fact only servants, untrained, uneducated, undisciplined, and often of bad character. Overworked, underpaid, ill-fed, and with no one to supervise them, or to teach them how to do their work, their lot was

a very hard one and it was no wonder that drunkenness was common among them. Early in the nineteenth century people at last began to wake up to the idea that this state of things was not satisfactory and might be improved. Various proposals were made for the formation of Protestant Sisterhoods, devoted to nursing and other good works. Such an establishment was founded in Germany about the year 1836, by Pastor Fliender and his wife. Fliender was the clergyman of the little parish of Kaiserswerth in the north of Germany. From very small beginnings he and his wife Friedericke had built up a hospital and an order of deaconesses, of which Friedericke was the first head. This order was a free religious association, not dependent on church or state authority. There were no vows, but the women admitted to it undertook to serve for five years, after which they were free to marry or to return to their families, if they wished. They were, however, encouraged to stay on and devote their lives to the work. They were trained in nursing, educational work, relief of the poor, the care of children and of the blind, and in fact all branches of useful and philanthropic work. In England, about the same time, the celebrated Mrs. Fry was busy with matters of the kind. Her chief work was in visiting and caring for the poor, especially prisoners, but through the efforts of her sister and daughter, an institute of nursing was founded in London, where women came to learn nursing. They lived in the institute, under proper supervision, and visited one of the great hospitals regularly in order to obtain training. Other sisterhoods were established about the same time, for nursing and visiting among the poor. These did good work in showing that the despised duties of the nurse might be performed by refined and educated ladies, but they were mainly religious organizations, and regular training and scientific teaching came in the second place. It was not yet understood that a nurse, in order to do her work well, must get knowledge and experience in a hospital. In no other way can she see all the different kinds of illness or accident and study them under skilled supervision. These first institutions, therefore, could not provide a thorough training—their organization was not really suitable—but they were

the first attempts at the reform in nursing which was afterwards carried out, when the experience of the Crimean War had compelled the public to think about the question.

In Florence Nightingale's girlhood, then, nursing was still looked on as a menial occupation, not fit to be taken up by ladies, except in the case of those few who entered religious sisterhoods. There were not wanting examples of ladies who had taken up philanthropic work of different kinds—Mrs. Fry, Mrs. Jameson, Miss Louisa Twining, Miss Harriet Martineau, Miss Mary Carpenter, all were women of refinement and education who bravely devoted themselves to work among the poor, and in prisons, hospitals and schools. But no lady ever became a professional nurse, and Miss Nightingale's parents were not at first willing to let their daughter give up the peaceful prosperous life at home, and go out into the world to devote herself to what seemed little better than a servant's work. There were therefore great difficulties in the way of her getting the training she desired, but she took eagerly every opportunity of learning.

The winter of 1849-50 was spent by Miss Nightingale in Egypt with Mr. and Mrs. Bracebridge, intimate friends of her family, to whom she was much attached. They went up the Nile in a dahabieh (a much more difficult undertaking then than now), and visited the Egyptian tombs and monuments. She was deeply interested in all she saw. Writing home on the day after her arrival in Alexandria, she says:

• I have set my first footfall in the East, and oh! that I could tell you the new world of old poetry, of Bible images, of light, of life, and beauty, which that world opens. My first day in the East, and it has been one of the most striking, I am sure—one I can never forget through eternity.

Yet with all her enthusiasm for the beauty and wonder that were before her, she never lost sight of the work she really cared for.

• She says in the same letter,

My time has been spent much to my satisfaction, as I travelled with two Sisters of St. Vincent de Paul from Paris to Auxerre, who gave me an introduction to the sisters here; and I have spent a great deal of time with them in their beautiful schools and Misericorde

And she goes on to describe in detail the work of the sisters in nursing and dispensing medicines to the poor. On her way home, in the summer of 1850, she paid a short visit to the Fliedners' institution at Kaiserswerth, and she was there for some months again in the summer of 1851. In the following autumn she visited the hospitals of Dublin and Edinburgh, and later she managed to spend some time with the sisters of St. Vincent de Paul in Paris, studying their methods of nursing and hospital management. Whenever she travelled for pleasure she visited hospitals and studied them, and though she never was able to have a regular course of several years' training (such as is expected of every nurse now-a-days), she did manage, in spite of all difficulties and objections, to learn a great deal about nursing, hospital management, and hospital construction. She had a natural gift for the work, but what she did was not accomplished by means of good intentions and unselfishness only. She trained herself as thoroughly as she could, and always insisted on the necessity for training. Her own words on this subject may be quoted:

I would say to all young ladies who are called to any particular vocation, qualify yourselves for it as a man does for his work. Don't think you can understand it otherwise. Submit yourselves to the rules of business as men do, by which alone you can make God's business succeed, for He has never said that He will give His success to sketchy and unfinished work.

The advice she here gives was acted on by herself to such good effect, that when the great opportunity of her life came, she was prepared as no one else was, and ready to meet the emergency.

After leaving Paris, she had not been long at home, when fresh work offered itself to her. There was in London a home for sick governesses, which had at that time got into difficulties from want of funds, and mismanagement. In August 1853, Miss Nightingale became superintendent of this home, which was really a small hospital, reorganized it, and brought it into a condition of order and prosperity. Before long this experience was to be of value to her, when she undertook the great task of reorganizing the hospitals in the Crimean War.

II. THE CRIMEAN WAR

In 1854, when the Crimean War broke out, there had been peace in Europe for nearly forty years. The generation that had grown up since the battle of Waterloo had scarcely known war except by hearsay. In those forty years such great advances had been made in science and commerce that Europe was more changed in that short time than in centuries before. Machinery of all sorts was invented, factories were organized, and railways, steamers, and telegraphs began to be used. Commerce and the means of communication were so much developed as to alter the conditions of life to a degree that is difficult to realize. In 1851, the first great International Exhibition was held in London. It was a very great popular success. People were impressed by the spectacle of the different nations joining together to display the development of industry, commerce and art, and they began to think of war as a thing of the past. It was therefore a great shock when the Crimean War broke out in 1854, and it was soon found that the old military organization now called into action after forty years' rest, was not equal to the demands made upon it. Even in the Peninsular War there had been terrible failures for want of a proper administrative system. For example, after the victory of Talavera the English General's transport broke down, because proper arrangements had not been made for feeding the horses, and he had to leave behind his wounded and a large part of his ammunition. The provision for the sick was so defective that 5,000 men died of dysentery alone. These disasters were chiefly due to want of organization. There was not then a single War Office, as now, responsible for everything connected with the war, including commissariat, transport and hospital arrangements. The work was divided between no less than eight principal departments. Authority was weakened by being split up, and there was, of course, great confusion and waste of time. The arrangements for the care of the sick and wounded were very primitive. Doctors

were provided, with medicines and appliances, and a few soldiers were told off as 'hospital orderlies' to attend to the sick, but there was no real nursing, and many died of neglect who might have been saved under modern conditions. The care of health was very little understood in those days, and trained nurses (male or female) did not exist, so that even with the best of systems the Army Medical Department could not have been expected to do much.

To the veteran officers who were, in the highest commands, when the Crimean War began, this seemed natural enough, and they asked for no improvement. It was said of one of them—Sir George Brown—

As he was thrown into a cart on some straw when shot through the legs in Spain, he thinks the same conveyances admirable now, and hates ambulances as the invention of the evil one.

But people in general had become unaccustomed to the horrors of war, and moreover they had become more alive to their fellow creatures' needs and sufferings of any sort. Slavery had been abolished, the old savage punishments for trifling crimes had been done away with, factory laws had been passed. Men were becoming less callous to human suffering, and they were waking up to the possibility of doing away with much of it. At the same time, very great advances had been made in medicine and surgery. Only it happened that people had not had their attention turned to nursing and hospital management. There had been practically no improvement in the nursing of the hospitals at home, in time of peace, still less had anyone thought of making arrangements for an unexpected war.

At the same time, people were much more aware of what was going on than they had formerly been. Telegrams and newspapers spread the news more quickly and widely than had ever been possible before, and moreover it came from other sources besides the ordinary official ones. In previous wars, the news reached England first in the form of official despatches. Fuller details became known later through private letters from individuals to their relations and friends. Now for the first time there were war correspondents—men sent out by the *Times*

and other newspapers, who made it their business to follow the army and describe what was going on as fully as they could. In this way the greatest publicity was given to all that happened, and the interest of the public at home was keenly aroused, especially by the letters published in the *Times*, as will be seen.

There is no need to enter here into the causes of the war. Suffice it to say, that in 1853, hostilities broke out between Russia and Turkey. England and France allied themselves with Turkey, and in 1854, they attacked Russia. An expedition was sent to invade the peninsula of the Crimea and to take Sebastopol, a strongly fortified town, with a splendid harbour, Russia's most important naval station in the south. On September 20, 1854, the Russians were defeated at the battle of the Alma, and their commander, Prince Mentschikoff, retired to Sebastopol. The allies took up their quarters near Balaclava, a little port to the south east, and proceeded to besiege Sebastopol. The struggle lasted all through the winter—always an inclement season in the Crimea, and that year one of exceptional severity—and cost the lives of many thousand men. On October 25, 1854, the Russians were repulsed at Balaclava, a battle made famous by the charge of the Light Brigade. On November 5, they were defeated at Inkerman. These were the great events of the siege, which dragged on till September 10, 1855, when Sebastopol was at last taken. The war soon afterwards came to an end.

Throughout the winter, the position of the allies was one of great difficulty. They were encamped on the bleak highlands to the south and east of Sebastopol, to which they were confined, the Russians occupying the fertile northern part of the Peninsula. No supplies were to be got in this barren inhospitable land. All the soldiers' food, tents, clothes, ammunition, food for the horses, the horses themselves, everything had to be brought by sea and landed at the little port of Balaclava, where the wharves were not big enough to accommodate the immense piles and bales of things that came. What with the difficulties of the position, and the lack of organization, the arrival of supplies was often very much delayed. The trouble began to be very serious.

after the terrible cyclone that took place on November 14, 1854. No fewer than twenty-one ships bringing supplies and stores were wrecked. With great efforts the losses were partly made up after a time, but the soldiers endured terrible hardships in the winter months for want of proper supplies. They were exposed to frost and snow and bitterly cold winds. Frostbite, scurvy, dysentery, and fevers were prevalent and there was more than one outbreak of cholera. And with all this, it was impossible to have enough hospital accommodation at the seat of war—there was no room, and it was impossible to get proper supplies. The huge numbers of sick and wounded made it imperative to have arrangements on a large scale and all these had to be at Scutari and other places on the coast of Asia Minor, 300 miles away across the sea. Here there was plenty of room, buildings were available, and supplies should have been easy to get. But there was no adequate organization for the hospitals. In the Army Medical Department there were some able and devoted officers, but there were too few of them, and they had not sufficient powers to act and to spend money. Lord Raglan (the General Commanding the English army) established a general hospital at Scutari, but he had to go off to the seat of war in the Crimea, and could not stay to organize it. The principal Medical Officer, too, was on duty in the Crimea. The hospitals were therefore left to the management of a small number of lesser officials, inexperienced in the kind of work required, and with powers insufficient to cope with the immense burden of it. There resulted terrible confusion, suffering, and loss of life. During the seven months ending on April 30, 1855, 11,652 men died in the hospitals or on the transport ships. That most of the suffering and mortality was preventable, was plainly shown by the fact that it was actually stopped, as we shall see, by the measures afterwards taken.

Meanwhile accounts were reaching England by every mail of the terrible hardships undergone by the troops. The newspaper correspondents, and chief among them Mr. W. H. Russell of the *Times*, sent home long letters describing what they saw and denouncing the authorities who were

responsible for it. On September 26, 1853, Mr. Russell wrote:

It is with feelings of surprise and anger that the public will learn that no sufficient preparations have been made for the wounded. Not only are there not sufficient surgeons—that, it might be urged, was unavoidable; not only are there no dressers and nurses—that might be a defect of system for which no one is to blame; but what will be said when it is known that there is not even enough linen to make bandages for the wounded—after the troops have been six months in the country there is no preparation for the commonest operation. Not only are the men kept, in some cases, for a week without the hand of a medical man coming near their wounds; not only are they left to expire in agony, unheeded and shaken off, though catching desperately at the surgeon when he makes his round through the foetid ship (in the journey from the Crimea to Scutari), but now, when they are placed in this spacious building (the Barrack Hospital at Scutari) it is found that the commonest appliances . . . are wanting.

A storm of indignation and anger was aroused in England. The newspapers were all full of it. On October 14, Russell wrote:

Are there no devoted women among us able and willing to go forth and minister to the sick and suffering soldiers of the East in the Hospital at Scutari?

This appeal was at once responded to. Plenty of women (most of them quite unqualified) were ready and eager to go. The difficulty was to find some one of sufficient experience and authority to choose out the most suitable ones and to be at their head. Miss Nightingale was by this time well able to meet such an emergency. It seems as if the whole course of her life had been leading up to this opportunity. In spite of all obstacles, she had worked with all her might at a despised and unpopular calling, and now, when the country needed help, she was able and ready to give just what was wanted. Mr. Sidney Herbert, the Secretary for War, and his wife, had long been her personal friends and were well acquainted with her character and work. She wrote to Mrs. Herbert, offering to go out to Scutari in charge of a small band of hospital nurses, and asking whether Mr. Herbert would authorize their going. Meanwhile, Sidney Herbert had been anxiously considering how to

improve the hospitals, and it had occurred to him that women might be employed in place of the rough and unskilled hospital orderlies who had always hitherto attended to the wounded in time of war. It was on October 14, that Miss Nightingale wrote to offer her services. On the very same day, Mr. Herbert had written to her, asking her to take command of a band of nurses to be sent out by the Government.

The deficiency of female nurses [he wrote] is undoubted, none but male nurses having ever been admitted to military hospitals . . . I am confident they might be introduced with great benefit, for the hospital orderlies must be very rough hands, and most of them, on such occasions as this very inexperienced ones. I receive numbers of offers from ladies who have no conception what a hospital is, nor of the nature of the duties, and they would, when the time came, either recoil from the work or be entirely useless, and consequently, what is worse, entirely in the way; nor would those ladies probably even understand the necessity especially in a military hospital, of strict obedience to rule, etc. . . . There is but one person in England that I know of who would be capable of organizing and superintending such a scheme, and I have been several times on the point of asking you hypothetically, if, supposing the attempt were made, you would undertake to direct it. The selection of the rank and file of nurses would be very difficult; no one knows that better than yourself. The difficulty of finding women equal to a task, after all, full of horror and requiring, besides knowledge and goodwill, great knowledge and great courage, will be great; the task of ruling and introducing system among them great; and not the least will be the difficulty of making the whole work smoothly with the medical authorities out there. That it is which makes it so important that the experiment should be carried out by one with administrative capacity and experience. . . . My question simply is, would you listen to the request to go out and supervise the whole thing? . . . I think I must not conceal from you that upon your decision will depend the ultimate success or failure of the plan. Your own personal qualities, your knowledge, and your power of administration, and, among greater things, your rank and position in society, give you advantages in such a work which no other person possesses. If this succeeds, an enormous amount of good will be done now, and to persons deserving everything at our hands, and which will multiply the good to all time. . . . If you were inclined to undertake the great work, would Mr. and Mrs. Nightingale consent? This work would be so national and the request made to you proceeding from the Government, which represents the nation, comes at such a moment that I do not despair of their consent. . . . I know you will come to a right and wise decision., God grant it may be in accordance with my hopes.

To such an appeal there could be no refusal, and Miss Nightingale herself was of course eager to go.

The preparations were hurried on, and after only a week, Miss Nightingale and her helpers were ready to start. She took with her ten Roman Catholic Sisters, eight Sisters of Mercy of the Church of England, six nurses from St. John's Institute and fourteen nurses from different hospitals. She was also accompanied by her devoted friends Mr. and Mrs. Bracebridge. The nurses were sent out as Government servants under Miss Nightingale's control, and all female nurses in the military hospitals were placed under her authority. There were four great hospitals at Scutari. There was another at Renkioi on the Dardanelles, which was organized by Dr. Edmund Parkes, a great authority on military hygiene, and one of the first to devote special attention to the subject. Others were established at Kullalli and elsewhere and there were two or three hospital ships. Besides all these, there were some hospitals in the Crimea itself.

Miss Nightingale and her party arrived at Scutari, after a fortnight's voyage, on November 4, 1854, the day before the battle of Inkerman. They at once took up their work in the Barrack Hospital.

Miss Nightingale was armed with the fullest support of Mr. Sidney Herbert and the Government at home; but she had to contend with the jealousy and distrust of the officials on the spot. It was natural that they should feel a strong prejudice against the plan of employing women to nurse the soldiers. The ordinary hired nurses of those days were as rough and incompetent as the orderlies, and would have been far more troublesome to keep in order, while the lady volunteers were inexperienced and undisciplined. Moreover the nurses had not been asked for by the military and medical authorities at Scutari; they had been forced upon them by the Government on its own initiative and partly in response to the pressure of public opinion. Naturally the officials responsible for the hospitals did not like to admit their own failure and were not inclined to welcome a band of women sent out to make up for their deficiencies.

Altogether, Miss Nightingale was in a very delicate position. Many of the officials gave loyal and cordial help,

but there were difficulties, especially at first. She was in great want of stores, clothes, linen and necessities of all sorts for the wounded.

Miss Nightingale was sometimes forced to take matters into her own hands, and on one occasion she broke open the door of the store rooms and distributed supplies that were urgently needed, without waiting for the proper official authorization. This of course caused great annoyance. But the Government had given her large powers, and it was known that she had the personal confidence of the Secretary for War. Her knowledge, ability and devotion, and the dignity of her personality and character, could not but impress the officials with whom she had to deal, and after a time, most of them became her hearty supporters. Even General Sir George Brown, 'the most unbending opponent of innovations' as Kinglake, the historian of the War, calls him—became an enthusiastic admirer of her work and was loud in her praises. So were Lord Raglan, Lord William Paulet (who was in command at Scutari), and other officers. Some interesting details of the personal impression made by her have been left by various eye-witnesses.

Miss Nightingale, [wrote Mr. Osborne,] in appearance is just what you would expect in any other well-bred woman who may have seen rather more than thirty years of life; her manners and countenance are prepossessing and this without the possession of positive beauty; it is a face not easily forgotten, pleasing in its smile, with an eye betokening great self-possession, and giving, when she wishes, a quiet look of firm determination to every feature. Her general demeanour is quiet and rather reserved . . . She has trained herself to command and has learned the value of conciliation towards others, and constraint over herself. Her nerve is wonderful; I have been with her at very severe operations,¹ she was more than equal to the trial. She has an utter disregard of contagion; I have known her spend hours over men dying of cholera or fever. The more awful to every sense any particular case, especially if it was that of a dying man, her slight form would be seen bending over him, administering to his case in every way in her power, and seldom quitting his side until death released him.

Her dignity and refinement inspired the greatest respect on all sides. There were not enough nurses to cope with

¹ It may be noted that the use of chloroform in operations was a new thing at this time.

the tremendous rush of work and orderlies were told off to help. These were simply common soldiers set apart for a time for hospital duty. It must have been at times terribly trying to have to nurse the sick and wounded soldiers with the help of their equally rough and unrefined comrades.

Miss Nightingale herself praised their conduct highly. After describing some of the difficult and disgusting duties which they had to do when nursing under her supervision, and sometimes with her help, she says :

I must pay my tribute to the instinctive delicacy, the ready attention of orderlies and patients during all that dreadful period : for my sake they performed offices of this kind, which they neither would for discipline nor for that of the importance of their own health. . . . And never one word nor one look which a gentleman would not have used ; and while paying this humble tribute to humble courtesy, I think how, amidst scenes of horrible filth, of loathsome disease and death, there arose above it all the innate dignity, gentleness and chivalry of the men (for, surely, never was chivalry so strikingly exemplified) shining in the midst of what must be considered as the lowest sinks of human misery, and preventing, instinctively, the use of one expression which could distress a gentlewoman.

It is plain indeed, that the work could not have been accomplished but for the presence among the nurses of Miss Nightingale, Miss Stanley, and other ladies of refined and dignified character. The paid nurses were drawn from a lower rank of life, and were in many cases so unsatisfactory that they had to be sent home for drunkenness and bad conduct. In less than eight months, out of twenty-one, some of whom had been highly recommended, no less than eleven had to be dismissed. This caused great distress and difficulty, and the chief burden of the nursing fell upon the Sisters of Mercy assisted by the lady volunteer nurses and orderlies.

The burden of work was enormous. On her arrival at Scutari, Miss Nightingale first spent a day in making arrangements with the doctors. Active work then began. On November 7, she went all over the hospital, from ward to ward, with nine nurses, and after dressing sixty-two people after the surgeon, she placed them two and two along the wards. The number of patients in the Barrack Hospital at this time was 1,730, and in the General Hospital, 650. There

were forty-five doctors. The battle of Inkerman was fought on November 5, and the hospitals, already full, were soon crowded to overflowing with the wounded. Many of the commonest necessities, such as soap, towels and basins, were wanting, and the hospital was terribly dirty and infested with vermin. Many deficiencies were supplied from private gifts which had been entrusted to Miss Nightingale, and from the Relief Fund raised by the *Times* and administered by Mr. Macdonald. On November 8, Mr. Bracebridge wrote to Sidney Herbert to report progress.

The Barrack Hospital [he says] is a quadrangle of 500 by 200 paces inside, arcades and corridors all round within, glazed; and rooms behind them to the external walls. A huge kitchen and offices in the centre; the building three stories high in some places, two in others . . . the great corridor, 450 yards long, and four rooms holding 27 each, have been filled with beds and men in double rows, leaving four feet to walk in the middle. This was done from 12 o'clock to 6 o'clock to-day. They were all well dressed and fed by 6 o'clock. Miss Nightingale and all her staff assisted. The sisters washed and dressed the wounds. We had 400 shirts sent by MacDonald; about 500 clean shirts were put on; half the men had only rags, or shirts saturated with blood. . . . The poor fellows are greatly pleased with their reception and hardly one even groaned. The behaviour of sisters and nurses perfect, especially the Catholic sisters, and the patients behaved very well to them.

These arrangements had hardly been made, when a message came bidding them be ready for 510 men who had been wounded at Inkerman.

We had but half an hour's notice [says Miss Nightingale] before they began landing the wounded. Between one and nine o'clock we had the mattresses stuffed, sewn up, laid down (alas! only upon matting on the floor), the men washed and put to bed and all their wounds dressed.

In December, 1854, another party of nurses was sent out from England under Miss Mary Stanley, daughter of the Bishop of Norwich, and sister of Dean Stanley. One of the lady volunteers who came with this party has described her experiences:

Two days after my arrival, Miss Nightingale sent for me to go with her round the hospital. [Miss Nightingale generally visited her

special cases at night.] We went round the whole of the second storey into many of the wards, and into one of the upper corridors. It seemed an endless walk, and it was one not easily forgotten. As we slowly passed along the silence was profound; very seldom did a moan or cry from those multitudes of deeply suffering ones fall on our ears. A dim light burned here and there. Miss Nightingale carried her lantern, which she would set down before she bent over any of the patients. I much admired Miss Nightingale's manner to the men—it was so tender and kind.

All the corridors were thickly lined with beds laid on low trestles raised a few inches from the ground. In the wards a divan runs round the room, and on this were laid the straw beds, and the sufferers on them. The hospital was crowded to its fullest extent. The building has since been reckoned to hold with comfort seventeen hundred men; it then held between three and four thousand.

It seems simply impossible to describe Scutari Hospital at this time. As we passed the corridors we asked ourselves if it was a terrible dream. When we woke in the morning our hearts sank at the thought of the woe we must witness that day. At night we lay down wearied beyond expression: but not so much from physical fatigue, though that was great, as from the sickness of heart from living amidst that mass of hopeless suffering. On all sides prevailed the utmost confusion; whose fault it was I cannot tell—clear heads have tried to discover in vain; probably the blame should have been shared by all departments of the hospital.

The nurses were terribly hard worked, and suffered greatly from the bad food and the dirty surroundings. However by Christmas things were greatly improved. The buildings had been made thoroughly clean, scrubbing brushes and brooms had been got, and the wards well scrubbed out. Wounds and fractures were daily dressed by the nurses, and the men were decently fed and clothed. During the first three months Miss Nightingale provided ten thousand shirts for the soldiers out of the *Times* Fund and private supplies. Soon after her arrival, she made arrangements for a kitchen to be fitted up to provide special food for the invalids. It was in working order in about ten days, and supplied food for nearly a thousand men. She also started a laundry in a private house which she rented for the purpose, so that there might be plenty of clean linen. The management of the hospital was entirely reorganized, great improvements were made in everything relating to the nursing and personal care of the men, and by December it was hoped that the worst of the trouble would be over.

But to everyone's disappointment, things soon got worse than ever. Numbers of sick and wounded continued to come in from the Crimea, and the wards became more and more over-crowded. The hospitals were not suited for the use they were being put to. They were really barracks or other buildings, lent by the Turkish Government, and were ill provided with even ordinary sanitary conveniences. Drainage, ventilation, and water supply were insufficient even if they were to be used as ordinary dwelling houses. They were in fact in a condition which can only be described as poisonous and all the improvements that had been made could not save the men from dying in large numbers. When the nurses were sent out, the Government had at the same time appointed Sanitary Commissioners to go to Scutari and enquire into the conditions there. But while the Commissioners were enquiring, matters were going from bad to worse. In February, the death rate had risen to forty two per cent. Miss Nightingale became more and more anxious. On January 8, she wrote to Sidney Herbert (with whom she was in constant correspondence) saying that the commission had done nothing and matters were worse than ever. Urged by her and by Sidney Herbert, the War Department at last issued instructions to the Commissioners to proceed immediately to carry out whatever works might be found necessary 'whether in the way of arrangement, of reduction of numbers in the wards, cleansing, disinfecting, or of actual construction, in order to secure the great ends of safety and health.'

The good effects of the works carried out in consequence of this order were shown at once in the reduction of the death rate :

Having already (17th of March) gone down from the terrible February rate of forty-two per cent to thirty-one per cent, it descended in the next fortnight to fourteen; in the next twenty days to ten; in the next to four; and finally in the next twenty days—days ending on the 30th of June, 1855—to scarcely more than two.

There could not be a more striking instance of the power of sanitation. All that devotion and skill in nursing could do had been done, but with what result? The sufferers had certainly been made more comfortable—but they went on

dying all the same. Clean and healthy surroundings, pure air and water, were provided, and as if by magic they ceased to die and nearly all recovered. Miss Nightingale always taught that cleanliness and ventilation were the first things necessary to secure health, and that without these nursing is of little avail. The truth of this must certainly have been brought home to her by the terrible experience of Scutari.

Henceforth work in the hospitals went on with steady improvement till the close of the War. Affairs at Scutari having been established on a more satisfactory footing, Miss Nightingale was able to visit the Crimea and see to the work being done at the seat of war. She embarked on May 4, 1855, with Mr. Bracebridge and several nursing sisters. They were accompanied by Monsieur Soyer, a Frenchman, famous in his day as a cook, who had gone to Scutari as a volunteer, with the object of reforming and regulating the cooking departments of the hospitals. His services had been accepted by Government and proved to be of great value. His work brought him into frequent contact with Miss Nightingale, as is recorded in his reminiscences of the war. After a smooth voyage, lasting about three days, they arrived in Balaclava harbour, and heard the sound of the cannon of Sebastopol. Miss Nightingale was at once visited by the principal doctors and officials who were concerned with her work, and arrangements were made for her to inspect the hospitals. The next morning she went ashore early with Monsieur Soyer, and visited the General Hospital. This held about 250 patients, and two of the bays of which the hospital consisted were set aside for cases of cholera. They then went to the Sanatorium where about 6,000 patients could be accommodated. The roads were very rough and dirty, and the Sanatorium was at the top of a very steep hill. Miss Nightingale went through all the wards, and also inspected the kitchens and provision stores. The next day she went to visit the hospitals at Kadikoi, about a mile from Balaclava. It took the party about half an hour to ride there, as the road was very bad, and blocked with traffic of all descriptions.

Hundreds of mules, horses, donkeys, artillery waggons, cannon, shot and shell, oxen and horses kicking each other, waggons upset in deep mudholes, infantry and cavalry passing and repassing.

From Kadikoi, Miss Nightingale went on to see some of the regimental hospitals and the General Hospital. With Mr. Bracebridge and Monsieur Soyer she afterwards rode through the English and French camps, and on to a point from which a near view of Sebastopol could be obtained. The large buildings of the town were plainly visible, and they 'could see every shot sent by the allied armies as well as by the enemy.' As they went up the road, a shell came whistling over their heads, but no harm was done. Late in the evening they returned to their quarters in the ship, with some difficulty owing to the darkness and the bad roads.

The following days were fully occupied with visits to the two chief hospitals, as well as the naval and field hospitals. The continual journeys over bad roads, and the hard work involved in these visits, made them very tiring. Miss Nightingale was struck down with an attack of Crimean fever and had to be taken to the Sanatorium, where she lay dangerously ill for about twelve days. Towards the end of May she got better, and the doctors advised her to return immediately to England. This she refused to do, and went instead to Scutari, where she arrived early in June. Her health gradually improved, and she set to work again as before. In February, 1856, she was able to go again to the Crimea, to superintend two new hospitals which had been established at Balaclava. While driving to the hospital one day her carriage was upset and a nurse who was with her was injured. After this a special carriage was made for her use.

Both in the Crimea and at Scutari, in addition to all her other work, Miss Nightingale found time to care for the wives and children of the soldiers, and their widows. She established a hospital for them and she organized a money order office, so that the men whose wives were at home could send their pay to them every month. She wrote innumerable letters for the soldiers to their families at home. Reading rooms and amusements were organized for the men themselves.

Sébastopol had fallen early in September, 1855, and peace was concluded in March, 1856, but it was some months before the troops were able to leave the Crimea. Not till July, 1856, was it possible for Miss Nightingale and the nurses to close the hospitals there and return to Scutari. In August the Scutari hospitals too were closed and Miss Nightingale went home to England. The Government offered to send a man-of-war to fetch her but she declined this, and came in an ordinary passenger steamer, travelling as quietly as possible, so as to avoid being publicly received and fêted on her arrival in England.

III. AFTER THE WAR

The experiment so anxiously attempted by Sidney Herbert had proved a triumphant success, and the services rendered by the nurses had won enthusiastic praise and admiration on all sides. In January 1856, while still in the Crimea, Miss Nightingale had received from Queen Victoria an autograph letter of thanks, with an enamelled and jewelled brooch specially designed for her by the Prince Consort, as a token of the Queen's 'high approbation.' The Sultan of Turkey had presented her with a valuable bracelet. On her return to England she was greeted with warm admiration and gratitude by her fellow countrymen, and a movement was set on foot with a view to offering her a testimonial. In November 1855 a public meeting had been held in London with this object. The Duke of Cambridge presided, and Mr. Sidney Herbert, Lord Lansdowne, and some distinguished medical men were among those present. It had been ascertained from Mrs. Sidney Herbert that the only thing Miss Nightingale would be willing to accept would be the means of founding a training school for nurses. It was agreed at the meeting that a sum of money should be raised and offered to her for this purpose.

Miss Nightingale was to have a free hand in choosing her council and organizing the scheme. The proposals were sent to her at Scutari, and she accepted them gratefully.

A sum of about £50,000 was eventually collected, of which over £4,000 was contributed by soldiers. It was hoped that Miss Nightingale would reside at the training school and direct it herself. This however proved to be impossible. The long hours of standing in the hospitals, and the over-work and anxiety she had undergone, had seriously affected her health. On returning to England

she was not able to rest and recover herself. Business connected with the administration of the hospitals in the war claimed her attention. She had to draw up a report (published in 1857) of the voluntary contributions she had received for the benefit of the patients—a complete record with full statistics of everything that had passed through her hands. She also prepared an *Exhaustive and Confidential Report on the Workings of the Army Medical Department in the Crimea*, published in 1857, and another work, *Notes on Matters affecting the Health, Efficiency, and Hospital Administration of the British Army*, was published in 1858. Besides reporting on matters that were now past, she was called upon to give advice and suggestions for plans for the future. The experiences of the war had impressed upon Mr. Sidney Herbert the urgent need for reform in the Army Medical Department. In 1857 a Commission was appointed to inquire into the sanitary state of the army. All the barracks and hospitals in the United Kingdom were inspected, and the housing, clothing, food and general condition of the soldiers were most carefully investigated. It was found that the death rate in the army was 17·5 per thousand, while the rate for the civil male population of corresponding age was 9·2. In Sidney Herbert's words:

There must be something radically wrong when soldiers at home, picked lives, at the healthiest and strongest period of life, offer an amount of mortality exceeding that of the most notoriously unhealthy trades, and double that of ordinary civil life.

The inquiry showed that this state of things was chiefly due to the insanitary state of the barracks. The active life of a soldier might naturally be expected to be a particularly healthy one. Over-crowding, want of ventilation, and bad drainage in the barracks had made it one of the unhealthiest. Reforms were introduced slowly and with difficulty, and Mr. Herbert had to work hard to overcome official apathy, and even resistance. He did however succeed in getting the barracks improved, and the hospital regulations revised. Better quarters were also provided for the soldiers' wives and children, and special hospitals were built for them.

the first of which was opened just before Mr. Herbert's death in 1861. By 1859 an Army Medical School was established, for training the medical officers of the Army. In 1862 the Sanitary Commission was constituted a standing body under the name of the Army Sanitary Commission. It continues its work to the present day, advising the Secretary for War as to sites and plans, and the sanitary construction of barracks and hospitals. In consequence of the measures taken, the health of the army improved greatly, and in 1897 the death rate was only 3.42 per thousand.

In all these matters, Miss Nightingale's knowledge and experience were of great value, and her counsel was constantly sought. Immediately after her return from the Crimea, in the Autumn of 1856, she visited Queen Victoria at Balmoral. Lord Panmure, who had succeeded Sidney Herbert as Secretary for War, was invited to stay there at the same time, in order that they might confer together. The Prince Consort wrote of Miss Nightingale in his diary:

She put before us all the defects of our present military hospitals and the reforms that are needed. We are much pleased with her, she is extremely modest.

She was in fact now recognized as one of the greatest living authorities on health and nursing, and her work in connexion with army sanitation made large demands upon her time and strength. Although she was now more or less an invalid, and generally confined to her room, she was always busy, her whole day occupied with writing and business interviews. By 1859 it became clear that she would be unable to change this way of life. Much as she wished to further the scheme for training nurses, it would be impossible for her to go and live at the proposed school and direct it herself. A Committee of Management was therefore appointed, and it was decided to establish the school in connexion with St. Thomas's Hospital, one of the great hospitals of London. There was even now some opposition and prejudice to be encountered, among both the doctors and the general public. The training and control (such as it was) of the nurses in hospitals had previously been entirely in the hands

of the medical staff. The results, as we have seen, were not satisfactory, but the doctors naturally did not like to lose any of their former powers. However, in spite of all difficulties the new training school was opened on June 15, 1860, with fifteen probationers. The nurses lived in a Home, and received their training in St. Thomas's hospital, where they attended lectures given by the doctors, and received practical instruction from the matron, Mrs. Wardroper. This lady was a woman of very great character and ability and she was appointed Head of the Nightingale School. At the time of her retirement (1887) upwards of 500 nurses had completed their training and entered into service on the staff of St. Thomas's or other hospitals, and of these over fifty educated gentlewomen were occupying important posts as matrons or superintendents of nurses in hospitals, infirmaries, and nursing institutions for the poor, not only in the United Kingdom, but also abroad. The School raised the status and improved the position of the nurses to such an extent as to open a new career to women.

But it should be noted, that Miss Nightingale never looked on nursing as a mere profession, as a mere means of earning one's living, however honourably and successfully.

Every nurse [she said] as also every man and woman, is a missionary—not in a hospital only, but in all places—for good or for evil. [Again] A woman, especially a nurse, must be a missionary, *not* as a minister or chaplain is, but by the influence of her own character, silent but not unfelt.

She did not, of course, mean that every man and woman, and every nurse, should be continually trying to persuade people to join any particular religious community. Herself a most earnest and devout Christian, she was ready to appreciate goodness wherever she found it. She was deeply penetrated with the feeling that every human being is individually responsible to God for the use made of His gift of life, and that every human life may be of the utmost importance to others, whether for good or for ill. A nurse who 'makes religion the every day business of her life,' in her view, is a 'missionary,' even if she

never speaks a word. One who does not, is a missionary for *evil* and not for good, though she may say many words, have many good texts at the end of her tongue. 'It is not what we say, what we do, or what we appear, that has influence with others, but what we *are*.' In addressing the nurses at St. Thomas's she once pointed out that in the religious Orders and Sisterhoods difficulties such as those arising from jealousy, grumbling, and impatience, were

provided against by enforcing blind, unconditional obedience through the fears and promises of a Church. Does it not seem to you that the greater freedom of secular Nursing Institutions, as it requires (or ought to require) greater individual responsibility, greater self-command in each one, greater *self-possession in patience*—so, that very need of self-possession, of greater nobleness in each requires (or ought to require) greater thought in each, more discretion, and higher, not less obedience?

Though the nurses at the Nightingale Home were members of a free secular association, bound by no vows, members of no Order, she felt that they were none the less dedicated to God. 'To be a good nurse,' she said, 'one must be a good woman; or one is truly nothing but a tinkling bell.' And a good woman, in her view, was one who should be actively engaged in God's work. 'To all good women,' she said, '*life is a prayer*'; and again, 'We might do all our actions and say all our words as unto God'—if only we would. The advantage of having educated and trustworthy nurses in the hospitals was soon felt. The reform was introduced in London, Liverpool, Edinburgh and elsewhere. In 1869 a superintendent and staff of nurses were sent to the soldiers' hospital established by the War Office at Netley. Others went abroad, to Berlin, Australia, Canada, and the United States. The new system was gradually introduced all over the world, and it is now a matter of course that every well ordered hospital should have a trustworthy staff of trained nurses. As Sidney Herbert had foretold, the good done by Miss Nightingale and her helpers in the Crimea was 'multiplied to all time.'

No complete record exists of the work done by Miss Nightingale in the years following the war. She lived quietly in London, generally confined to her room, but

devoting herself to her work with rare earnestness and zeal. From scattered notices here and there we may get a glimpse of her activity. The Nightingale Training School of course took up much time and thought. Every year she wrote a letter to the nurses being trained there, which was read to them on her behalf. In these letters is seen the combination of high ideals and practical good sense which was characteristic of her. In an address written in 1875 fifteen years after the school had been opened she says :

A woman who takes the sentimental view of nursing (which she calls 'ministering' as if she were an angel) is, of course, worse than useless ; a woman possessed with the idea that she is making a sacrifice will never do ; and a woman who thinks any kind of nursing work 'beneath a nurse' will simply be in the way. But if the right woman is moved by God to come to us, what a welcome we will give her, and how happy she will soon be in a work, the many blessings of which none can know as we know them, though we know the worries too !

[In the following year she wrote] Nursing is said, most truly said, to be a high calling, an honourable calling. But in what does the honour lie ? In working hard during your training to learn and do all things perfectly . . . Here are two of the plain practical little things necessary to produce good nurses, the want of attention to which produces some of the greatest evils in life ; quietness, cleanliness. (a) Quietness in moving about the 'Home', in arranging your rooms, in not *slamming* every door after you ; no noisy talking on the stairs or in the lobbies . . . For a sick ward ought to be as quiet as a sick room, and a sick room, I need not say, ought to be the quietest place in God's kingdom ; . . . (b) cleanliness in person and in our rooms, thinking nothing too small to be attended to in this respect.

• In another address, after urging the nurses to observe their cases carefully and take notes about them with a view to improving their knowledge and powers of observation, she says :

And do you not think this a religious duty ? Such observations are a religious meditation : for is it not the best part of a religion to imitate the benevolence of God to man ? And how can you do this—in this your calling especially—if you do not thoroughly understand your calling, and is not every study to do this a religious contemplation ?

The Nurses' *Case Papers* were from time to time sent to Miss Nightingale for her to read. Writing in 1876, she

says, 'I read with more interest than if they were novels your *Case papers*.' The hours of work, the subject of lectures, all the details of routine at the Home were of interest to her. When nurses trained there went to take up posts in other hospitals they were sure of her sympathy and encouragement, and their careers in Egypt, Canada or wherever it might be, were followed by her with lively interest. Miss Nightingale's advice was often asked in matters connected with hospitals and nursing all over the world. In 1867 she wrote a paper entitled *Suggestions for the Improvement of the Nursing Service of Hospitals, and on the Methods of Training Nurses for the Sick Poor*. This was written at the request of a Government Department—the Poor Law Board—for their guidance in organizing the new hospitals or infirmaries which they were establishing for the sick poor. The authorities of many hospitals wrote to her for similar suggestions for their use. In 1872 we find her writing to advise a committee that was engaged in reforming hospital conditions in New York. About the same time, a great deal was being done in England to try and improve the nursing of the poor, both in institutions and in their own homes, and Miss Nightingale did all she could to promote this movement.

May we hope [she wrote] that the day will come when every mother will become a health nurse, when every poor sick person will have the opportunity of a share in a district sick nurse at home. [Again] Hospitals are only an intermediate stage of civilization, never intended, at all events, to take in the whole sick population.

And in a paper on *Rural Hygiene*, written in 1893, we find the following:

God did not intend all mothers to be accompanied by doctors, but He meant all children to be cared for by mothers.

The wisdom and truth of these words is as applicable in India as in England, and we shall see that Miss Nightingale was most anxious for the improvement of health in Indian village homes.

She wrote many papers on nursing and kindred subjects. Her best known work, *Notes on Nursing*, was published in 1860.

The Notes [she wrote] are meant simply to give hints for thought to women who have personal charge of the health of others. Every woman, or at least almost every woman, in England has, at one time or another of her life, charge of the personal health of somebody, whether child or invalid; in other words, every woman is a nurse. Every day sanitary knowledge, or the knowledge of nursing, or in other words, of how to put the constitution in such a state that it will have no disease, takes a higher place. It is recognized as the knowledge which everyone ought to have—distinct from medical knowledge, which only a profession can have.

She goes on to give practical directions in detail about ventilation and warming, and how to make houses healthy, and prevent illness and infection:

‘With God’s blessing, he will recover’ is a common form of parlance. But ‘with God’s blessing,’ also, it is, if he does *not* recover; and ‘with God’s blessing’ that he fell ill, and ‘with God’s blessing’ that he dies, if he does die. In other words, *all* these things happen by God’s laws, which are His blessings; that is, which are all to contribute to teach us the way to our best happiness. Cholera is just as much his ‘blessing’ as the exemption from it. It is to teach us how to obey His laws.

Coming to sick nursing, with keen insight into the patient’s feelings, she describes how he should be kept quiet, and free from worry: what kind of food is likely to be suitable, and how it is to be administered; how beds ought to be kept clean and wholesome and comfortable; how the sick room is to be kept clean and well aired.

Without cleanliness, you cannot have all the effect of ventilation; without ventilation, you can have no thorough cleanliness. Very few people, be they of what class they may, have any idea of the exquisite cleanliness required in the sickroom.

She insists strongly that nurses should learn to observe patients so as to understand their condition and their needs:

The very alphabet of a nurse is to be able to read every change that comes over a patient’s countenance without causing him the exertion of saying what he feels.

Most of Miss Nightingale’s writings are hidden away in the back numbers of periodicals or in official reports.

Notes on Nursing was published as a separate book, and has been many times republished. It has the fresh and vigorous quality of all her work, and its teaching remains as true and as valuable as when it was first written. This is the more remarkable because of the fundamental changes that have taken place in nursing and hygiene since her day. The subject is too wide to be entered upon here, but it may be observed that all sanitation was then only in its beginnings, and its founders—Dr. Parkes, Sir Henry Acland, Sir Edwin Chadwick, Sir Douglas Galton, and others—were her contemporaries as well as friends and fellow-workers. Scientific and medical discoveries have led to developments which were then quite undreamed of, and Miss Nightingale's views on many points would no doubt have been greatly modified in the light of later knowledge. That her teaching on the general principles of nursing and hygiene has even now not grown out of date is a striking proof of her insight and ability, and helps to explain why she was so much looked up to as an authority on these subjects, and why her work was so wide in its range touching, as it did, the army, the hospitals, the towns, the country and India.

IV. INDIA

It was not long after her return from the Crimea that Miss Nightingale's thoughts were turned towards India. Writing home during the Mutiny Lady Canning said: 'Miss Nightingale has written to me. She is out of health and at Malvern (a health resort), but says she would come out at twenty-four hours' notice, if I think there is anything for her to do in her "line of business".' Her wish to go to India was no passing one, but it was never fulfilled. Her health, as we have seen, did not recover sufficiently for her to undertake any active work again. Nevertheless she did a great deal of work in connexion with India. There, as in England, she had a great opportunity. She attained her unique position as an authority on the subject of sanitation just at the time when public opinion was beginning to be alive to its importance, and reforms had therefore some chance of being carried out.

Events followed much the same course as they had done in England. General sanitary reform followed on the sanitary reform of the army. The high death rate among the troops in India had long been a trouble to the authorities. In a letter to Sir Sydney Cotton, in 1858, Sir John Lawrence attributed it partly to intemperate habits, partly to climate.

Look [he wrote] at the sanitary returns of the English army at home which have been lately published. Just see what the mortality, even there is compared to the general population. I see that the Committee put it all down to bad barracks. I suspect when that cause, has been removed, we shall find that the mortality among the troops in England will still continue to be excessive. In England however, it could not be put down to climate, and so it is attributed to bad accommodation.

But Sir John Lawrence was mistaken, for, as we have seen, the results of improving the barracks in England

showed that the Commission were quite right. In the same way, the health of the troops in India was greatly improved after better accommodation had been provided. Sanitary improvements were afterwards taken up energetically by Sir John Lawrence himself during his viceroyalty. But at this date their value was not generally recognized, and in fact, sanitation was scarcely yet practised at all in India. As an illustration of this, we may quote a letter from Sir John Strachey, printed in the Life of Lord Lawrence. He thus describes the state of Calcutta as it had been in about 1862 :

This city, the capital of British India, supplies an excellent type of what has been everywhere going on. The filth of the city used to rot away in the midst of the population in horrible pestilential ditches, or was thrown into the Hooghly, there to float backwards and forwards with every change of tide. To nine-tenths of the inhabitants clean water was unknown. They drank either the filthy water of the river polluted with every conceivable abomination, or the still filthier contents of the shallow tanks. The river, which was the main source of supply to thousands of people, was not only the receptacle for ordinary filth. It was the great graveyard of the city. I forget how many thousand corpses were thrown into it every year. I forget how many hundred corpses were thrown into it from the Government hospitals and jails; for these practices were by no means confined to the poor and ignorant; they were followed or allowed as a matter of course, by the officers of the Government and of the Municipality. I remember the sights which were to be seen in Calcutta in those days, in the hospitals and jails and markets and slaughter-houses and public streets. The place was declared in language which was not, and could not be stronger than the truth required, to be hardly fit for civilized man to live in.

There had, in fact, hitherto been no attempt to deal with such matters. A good deal had been done in the way of making roads and canals towards the end of the East India Company's time, but the necessity for sanitary works had not yet been perceived by the Government, much less by the people. It could not have been otherwise, considering the state of knowledge at that time. Personal cleanliness had of course been practised by the people of India time out of mind, as well as ceremonial and religious customs for avoiding pollution. But scientific sanitation was unknown; it was not known that illness such as fever and cholera could

be kept off by taking certain measures and that a great improvement to health would result from attention to drainage, water supply, ventilation and the like. In Europe these things were only then just beginning to be understood. No general Public Health Act was passed in England till 1848. The experience of the Crimean War, six years later, afforded a lesson in these matters which was of great value, and gave a powerful stimulus to progress. The application of sanitary measures in India followed soon after.

In England, as we have seen, the health of the army became the subject of serious enquiry in consequence of the Crimean War. Following on this, a Royal Commission was appointed to enquire into the sanitary state of the army in India. The results were very much alike. It was found that the barracks were overcrowded and insanitary, and the effects were far worse than in the temperate English climate. The death rate among soldiers in England had been 17·5 per 1000, which was thought very bad, but the death rate in India was found to be as much as 69 per 1000 annually. This was a startling revelation, and it roused the authorities to the necessity for sanitary measures.

The report of the commission was submitted to Miss Nightingale by the Government, with the request that she would comment on it, and her observations were afterwards reprinted separately, by order. In a paper by her, entitled *How people may live and not die in India*, written in the same year (1863) she describes the report as follows :

This report, unlike other reports, was based on two kinds of evidence : (1) The usual oral evidence of witnesses ; (2) reports from every station in India, in answer to printed questions sent out, the answers being signed by the commanding officer, the engineer officer, and the medical officer, of each station. It was truly said, that such a complete picture of the life of India, both British and native, is contained in no other book in existence.

(It must be remembered that at that time the systematic collection of information and statistics by Government had scarcely begun).

The high death rate [she says] has been attributed to the Indian climate.

One most important result of the inquiry of the Royal Commission has been to destroy this bugbear. They have reduced "climate" to its proper dimensions and influence, and they have shown that, just as hot moist weather at home calls people to account for sanitary neglects and, acts of intemperance, so does the climate of India call to account the same people there.' She points out that 'at home there have been great improvements everywhere in agricultural and town drainage, and in providing plentiful and pure water supplies. There is nothing of the kind in India. There is no drainage either in town or country. There is not a single station drained. If such a state of things existed at home, we should know that we should have fevers, cholera and epidemics to expect. But hitherto only a few enlightened people have expected anything of the kind from these same causes in India (though they are always happening).

She goes on to explain the full scope and significance of the report. If the improvements recommended were carried out:

The normal death rate of the British soldier would be not sixty-nine per 1000, but ten per 1000, say the Commissioners. But it is not for the soldier alone we speak. The report has a much deeper meaning and intent than this: it aims at nothing less than to bring the appliances of a higher civilization to the natives of India.

The first thing was to provide some means of carrying out sanitary measures. Sanitary officers were appointed in consequence of the report of 1853, but much more organization was needed, if any real impression was to be made on the health of the country. Little was done during the brief viceroyalty of Lord Elgin, who died in 1863, but his successor, Sir John Lawrence, began that great course of public improvement which has ever since been a chief object of the Government. It was only five years since the administration of India had been revolutionised by being brought under the direct control of the Crown. Under the new Government, all kinds of public works were undertaken and pushed on with extraordinary vigour.

Sir John Lawrence [says Strachey] was the first Viceroy to take up seriously the great question of sanitary improvement in India in the army, in the jails, and in the towns. Miss Nightingale called him

'the father of sanitary measures in India.' His biographer tells that he was 'in constant and confidential communication with her throughout his term of office.'

Sir John Lawrence went as Viceroy to India early in 1864. Soon after his arrival, a Sanitary Commission was appointed, under the presidency of Sir John Strachey, to enquire into the condition of towns and cantonments throughout the country, and to make suggestions for their improvement. In 1866 the civilian sanitary officers previously appointed were replaced by selected medical officers appointed as Sanitary Commissioners for each province, and the scope of their work was greatly enlarged, the Government of India declaring that the new posts were intended solely for improving the sanitary condition of the people. In the districts, the civil surgeons were constituted health officers. A year later, it was proposed to strengthen the machinery already created in India by forming a Sanitary Department at the India Office in London. This project was actively supported by Sir Bartle Frere, who during his service in India, and in particular as Governor of Bombay, had taken a great interest in sanitary matters. It was he who had caused the old ramparts of Bombay to be thrown down, so as to let in the sea breezes, and the Bombay Municipality, started under his régime, had done much to make the town more healthy. He was now a member of the India Council, and was in frequent communication with Miss Nightingale about the new scheme. In his Biography, it is stated that among his papers for 1867 and the five following years there are 'considerably more than a hundred letters, short or long, from Miss Nightingale to him, mostly upon sanitary questions affecting India, and especially the soldiers there, full of enthusiasm and hope for all that was being done and planned to remove causes of disease and improve the health of the great towns and cantonments, and continually appealing to Frere for assistance and advice in her communications with Sir Stafford Northcote, Lord Salisbury, Sir John Lawrence, and others in office.' In August 1867, Sir Stafford Northcote, then Secretary of State for India came to see her about the proposed Sanitary Department.

We had a long conversation, [she wrote to Frere] 'much more satisfactory to my hopes than I had expected. . . . He proposes to have a Committee at the India Office expressly for this (sanitary) work. I told him we want the executive machinery to do it (in India) and the controlling machinery (at the India Office) to know that it is being done. . . . He proposes yourself as President.

In November, 1862, a despatch announcing the formation of the new department and defining its functions was sent out from the India Office to the Government of India. It was first sent to Miss Nightingale, for her to comment on.

I find nothing, [she wrote] to add or to take away in the memorandum (sanitary) . . . It is a noble paper, an admirable paper—and what a present to make a Government. You have included in it all the great principles—sanitary and administrative—which the country requires. And now you must work, work those points until they are embodied in local works in India. This will not be in our time for it takes more than a few years to fill a continent with civilisation. But I never despair that in God's good time every man of us will reap the common benefit of obeying all the laws which He has given us for our well-being.

The progress made since the Royal Commission of 1863 was reviewed by Miss Nightingale in a paper written in 1873 for the National Association for the Promotion of Social Science.

Ten years have passed, [she says] during which most of the sanitary proceedings which have been initiated, and their results, have passed (on paper) through our hands. And we may now reckon up our gains. . . . We *have* made an impression on the sanitary state of that vast country; but 'impression' so far as this: only to show us the immense work that remains to be done; the immense success that *can* attend it—we cannot yet say the immense work that has been done. But how much this is; what progress since the time we were taught to lament the 'hopeless Indian climate!'

An impression had certainly been made on the health of the Army. The death rate in 1863 had been about 69 per 1000; by 1871 it was reduced to little over 18 per 1000.¹ As to sanitation in the large towns:

Ten years ago [she says] I reported to the Royal Commission that no one of these three large and populous cities—seats of Presidencies—

¹ In 1883 it was less than 11 per 1000.

Calcutta, Bombay, Madras—had as yet arrived at the degree of civilisation in their sanitary arrangements at which the worst towns had arrived before sanitary reform sprang up in England at all. . . . Bombay, the second city of our Empire, had, it is true, a better water supply, but no drainage. Calcutta was being drained, but had no water supply. Two of the seats of Government had thus each one-half of a sanitary department, which halves ought never to be separated. Madras had neither.

Since then a supply of pure water had been provided for Calcutta, and great improvement had been effected in drainage, with the result that 'Calcutta in 1871 was more salubrious than Manchester or Liverpool.' In Bombay, plans for drainage had been proposed, but nothing had been done; in Madras, a water supply had been provided.

A beginning had been made in the great towns and in the cantonments, and Miss Nightingale now urged that more should be done in the districts:

'Till country drainage is introduced, till irrigation and drainage are combined—both better when together, the first dangerous when apart—no great improvement in health, civilisation, or vigour of the people can be expected.

. . . . The drain upon human life and happiness, of fever in India is literally untold. But as far as can be told—in 1871, a peculiarly healthy year, about one and a half millions of people died in India from fever, or nearly 12 in every 1000, or 23 times as many as cholera destroyed.

But this is a mere trifle compared with the ravage fever commits in sapping the strength and vigour of the country, in making the young old, the healthy infirm for life, the industrious helpless invalids, the rich poor, the thriving country a waste.'

Nothing, she thought, could compare with irrigation for the material progress of people, 'and their moral progress is greatly dependent upon it; for, till the people are in a measure relieved from their bondage to poverty and want, they cannot attend to other things.' This question was brought into painful prominence a few years later, by the great famine of 1876-7. Miss Nightingale wrote a letter on irrigation which was printed with a pamphlet by Sir Arthur Cotton on the famine, and in the Autumn of 1878, she wrote another paper in which she discussed the famine, the general poverty of the Indian peasant and its causes, and in particular, 'the great question of money-lending



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which overshadows all. Three papers on education for the ryots were contributed by her in the following year to the *Journal of the National Indian Association*.

In the most elementary affairs of a good Government [she wrote] a first necessity seems to be that officials, even the smallest, should be able to read and write. But the difficulty of finding even patels (village headmen) in India who can read and write stares us in the face; in registration, in obtaining the simplest village return, above all in making the patel do his life and death duty as sanitary head of the village.

She felt keenly the importance of obtaining trustworthy statistical information as a guide for future action.

Village sanitation, perhaps the most difficult question of all, was specially interesting to Miss Nightingale. She had studied rural hygiene in reference to England, and she was anxious that sanitary inspectors should be appointed there in every county, and also 'health missionaries,' who would explain to the country people how to keep their homes clean and healthy. She hoped that the same thing might be done in India. In a letter of 1889, to the Poona Sarvajanik Sabha, she says,

There must be, as it were, missionaries and preachers of health and cleansing if any real progress is to be made.

She had begun to correspond with the Sabha, on the suggestion of Sir William Wedderburn, in 1887, when she wrote,

To bespeak their special support in favour of village sanitation, and to obtain their advice as to the practical steps which can best be taken towards that end.

I am anxious, [she wrote] that India should have the benefit of a system which I have seen working with so much advantage in England. Fifty years ago the state of England was much what the state of India now is. The people had not themselves the power to amend it. But they only wanted a little organization with inspection. Now they have the power. The community itself is the engine that does the work.

The people in India, she thought, should be encouraged

To organize themselves in the villages for sanitary purposes—the villagers themselves doing the work, with the necessary advice, and (in the case of unsatisfactory results) stimulus from outside.

In another letter she wrote as follows:

It has been said, The people of India have no faith in sanitary measures. They regard epidemics as the visitation of a malevolent power. (Is this still true?) Yet no one can take care of the people's health but the people themselves. How much may—*no, must* be done by them! Without them, how little! Without engaging the people themselves on our side, or rather on their own side, without convincing them of what is for their true interest, their own life and health, we may pass what Sanitary Acts we please, but is it not true that they will remain in great measure a dead letter?

And may I, as a woman, venture to whisper that one of their first duties at home will be to influence their ladies? There is perhaps no country in the world where woman's influence is so high as in India; nor where the ladies have sometimes manifested such capacity of governing and of administration.

But it is not to this that I allude. It is to the everyday domestic government and administration of the home . . . Now the domestic health depends on the woman. Yet is it not sometimes the case that the native gentleman, even where he knows, is unwilling to interfere with his own wife? The ladies must be paramount, whether instructed or uninstructed, in their own households. Let the ladies first be instructed by their own husbands, and fathers, we humbly suggest; and get them then to instruct other women for women can only be taught by women in these matters. Least of all can they be taught by legislation. A *private public* opinion must, so to speak, be created among them how to save their own and their children's health.

In England there are Ladies' Sanitary Associations, of which our Queen is often the gracious patroness. In India, let the time be near when there will be Indian Ladies' Sanitary Associations, of which our Empress, who is deeply interested in the welfare of her beloved daughters of India, might no doubt become the gracious patroness.

Reference has already been made to a paper written by Miss Nightingale in 1893 on Rural Hygiene. This paper was written to be read to an audience of English ladies,¹ but she began it with a reference to India.

In two of the provinces of wide India, [she says], it has been asked whether something could not be done by instructed native lecturers, who were also to *go round the village showing the people on the spot* where to put their refuse, how to keep their water-supply pure, etc. And in one of these provinces, the lecturers were to be seconded by instructed native *women* visiting and teaching health habits to the village poor native *women in their own homes*. And the true word has been spoken: what can be done for the health of the *home* without the woman of the *home*?

¹ The Conference of Women Workers, at Leeds, 1893.

Let not England lag behind—especially not in the conviction that nothing *can* be done without personal friendship with the women to be taught. It is a truism to say that the women who teach in India must know the languages, the religions, superstitions, and customs of the women to be taught in India. It ought to be a truism to say the very same for England. We must not talk *to* them, or *at* them, but *with* them. She goes on to urge people 'to make personal acquaintance with the poor.' 'The knowledge of a man,' she says, 'must go before the love for him—acquaintance, friendship, love, can only come in this order; the love that springs from the sympathy of a close and accurate knowledge of the ways, the habits, the lives of the poor is not a mere sentiment, but an active and fruitful enthusiasm.

She then describes 'the present state of rural hygiene (in England), which is indeed a pitiful and disgusting story, dreadful to tell,' and proposes detailed remedies, including the establishment of Health Missioners, such as she advised for India.

The difficulties in the way of introducing scientific sanitation in India are of course far greater in the villages than in the towns, where there is a more enlightened public opinion, and better organisation, as Miss Nightingale realized. She was therefore anxious to enlist Indian public opinion in favour of sanitary measures and sanitary education, and to arouse interest in the subject. A favourable opportunity for this was afforded by the International Congress of Hygiene and Demography, which was held in London in 1887. These Congresses had been established in order to awaken public interest in sanitary questions, and to bring together experts and people who were interested in such matters. This meeting (the seventh) was the first to be held in England. India was to be represented, and Miss Nightingale wrote to the Poona Sarvajanic Sabha as follows:

I am anxious to urge upon Indian friends interested in the cause of sanitation the importance of the present occasion so that the representatives from India may include as large a number as possible of those possessing accurate and detailed knowledge of the condition and wants of the Indian people.

The Congress aroused considerable interest in India. Representatives were sent, not only from the Governments of the Presidencies and Provinces, but also from the Universities, the Chambers of Commerce, the leading

Municipalities, and influential Indian societies. The Saryjanik Sabha was represented by Sir William Wedderburn and others. Twelve papers, of which seven were by Indian gentlemen were read and presented to the Indian Committee of the Congress, and sanitary questions were discussed. Finally, it was decided to organize a Tropical Section at future Congresses 'with a view to a more full discussion of questions affecting sanitation and the origin of disease in tropical climates.' This was carried into effect, and Miss Nightingale contributed a paper on Village Sanitation in India to the Tropical Section of the Eighth Congress, held three years later at Buda-Pesth.

Lack of space makes it impossible to give anything like a complete account of Miss Nightingale's work in connexion with India. We have seen how she watched over the beginnings of sanitary organization, advising the authorities, and urging on improvements by every means in her power. In a memorandum addressed to Lord Cross (then Secretary of State for India) in the spring of 1892, she spoke of village sanitation as 'that branch of the subject in which I take a special and personal interest.' The note of personal interest is felt all through her writings on Indian topics. In these papers, as in 'Notes on Nursing,' it is evident that she possessed in a very unusual degree the power of understanding other people's circumstances and caring for their needs. Her insight did not come of mere kindly feeling, it came of an intellectual vigour which enabled her to read dry official reports and statistics 'with more interest than if they were novels,' and to grasp what they really meant. Her early travels in Egypt had given her a glimpse of the East, and she was always eager to hear about Indian affairs from those who had a first-hand knowledge of them. She realized the conditions of life in India, and cared for their improvement, with an intensity which is seldom possible to anyone, who, like her, knows the facts only from hearsay. She had never seen a ryot, or indeed an Indian of any class except the rich and educated who could visit her in England, yet her writings show a personal interest in the poor of India which could scarcely have been greater if she had lived there for years.

V. CONCLUSION

Not long after her return from the Crimean War, Miss Nightingale had settled in London, where she spent the rest of her life. During the earlier years of this period, she occasionally visited relations in the country, but her way of life did not vary. A personal impression of her in later years may be quoted from a description by one who visited her in London.

After I had waited a few minutes, a maid came and took me upstairs to Miss Nightingale's room. Here I found her, lying supported by pillows on a couch by a large bow window. The subdued roar of the London traffic could be heard outside, but there was a pretty view of sky and trees, and I seemed to have stepped from the crowded noisy street into some quiet country house. The room was bright and pleasant, with plenty of books and pictures, and a large table near the window covered with flowers. The atmosphere was one of cheerful tranquillity, and the pleasant impression was completed by Miss Nightingale's kindly greeting. She was wrapped in a fine white shawl, and on her head she wore a pretty cap of delicate lace. I was impressed by the grace and dignity of her appearance; her features expressed refinement as well as vigour, and her voice was pleasant and musical. I soon found myself talking to her quite freely, carried away by her kindness and interest. Though she must be approaching seventy, it never occurred to me to think of her as being old; her delicate complexion and the animation of her manner gave one the impression of a much younger woman than she was in reality.

Miss Nightingale led the outwardly tranquil and uneventful life of an invalid, but even the imperfect account here given may suffice to show how full her days were of interest and work. In the closing years of her life, King Edward VII. awarded her the Order of Merit, an honour which had also been conferred on Lord Morley and on some of the greatest men of science of the day, and had hitherto been granted to no other woman. As her strength gradually failed from old age, she withdrew from work. She died at the great age of 91, on the 13th of August 1910. It was proposed that she should receive the honour of burial in Westminster Abbey,

but this was impossible, as she had given directions in her will that her funeral should be quite private and quiet. Her body was accordingly laid in the little country churchyard near her early home in Hampshire where her father and mother had been buried. On the same day, a memorial service was held in St. Paul's Cathedral in London, which was attended by representatives of the King and Queen Alexandra, and by a large number of nurses and soldiers and others who came to do honour to her memory.

The pioneers in any new field of work must always have their special difficulties to overcome, and Miss Nightingale had her full share. But one great advantage was hers: she was absolutely independent and disinterested, and it was always quite out of the question that anyone should suppose her to be otherwise. Money she did not want; she had enough, and wished for no more. She worked because she cared for her work, and not for payment nor for her own credit. The public notice and the honours she received were not sought by her. Except during the eventful days of the Crimean War, when she was perforce prominently before the world, she lived and worked so quietly that hardly anybody except those who came into direct contact with her, was aware of her activity. This independence of the world was a great source of strength; no one who knew her could fail to be impressed by it, consciously or unconsciously. Yet she never renounced the world in any formal way: she lived in her own house in London, in pleasant surroundings such as any lady of her position in life might have had, seeing, her relations and friends as freely as her health, and above all her work permitted.

It may be worth while to notice from what small and discouraging beginnings came the great results which she achieved. When she went, at the age of thirty-four to organize the nursing in the Crimean War, she must have felt that a great opportunity was before her, and that the course of her life's work would greatly depend on her success or failure in that tremendous task. Her success there was no triumphant certainty from the first, as it almost seems to us now; it was only won after a hard struggle with difficulties that must often have seemed overwhelming. Afterwards, as we