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ART. V.—THOUGHTS ON SOCIAL SCIENCE. (PART IV.)

DISPENSARIES AND NURSING ASSOCIATIONS.

IN anticipation of the Social Science Congress to be held this month in Huddersfield, a fourth paper on this subject is submitted to the readers of THE CHURCHMAN.

Becoming habituated, under circumstances already set forth,¹ to look at questions *en masse*, and being more and more deeply convinced of the practical importance of looking out for and noting the “tendencies” or influencing circumstances, it could not but happen that my own business in life—viz., the calling of a physician—would day by day furnish illustrations, valuable as touchstones, to test the reality of previous conclusions, and helpful as guide-posts to point in the direction of greatest promise for the future. A clergyman in like manner would have learnt his first social-science lessons in his ministerial vocation; a lawyer in the contact with his clients and their needs; an architect, in building operations; a merchant, in dealing with his customers; each and every man in pursuit of his special line of business, provided only that he be disposed to regard it, not merely as a mode of getting a living, but as an agency for supplying certain particular wants of the community at large.²

Now it is the good fortune of a physician to be so situated that in following his profession, he is brought into contact with numberless questions of general interest, and therefore the more suited for laying before the public, questions many-sided, circumstances imperatively demanding that something should be done without delay; problems of great difficulty, yet seemingly easy for anyone, by money or personal endeavour, to attempt some kind of solution. Hospitals, dispensaries, nursing institutions, medical reform from the *patient's* standpoint, not to mention such moot-points as the efficacy of homœopathy, and the mysteries which are included under the much-abused, but little understood, expression, “Professional Etiquette.” These may suffice as topics of general interest, falling within the province of medicine, and providing the student of Social Science with abundant food for reflection. Of these I select medical charity as being at once most comprehensive and most likely to interest the readers of THE CHURCHMAN.

¹ THE CHURCHMAN for September, 1882; also for March and May, 1883.

² Carlyle once made the remark that in the good time coming every trade would become a profession; but it is a truer view to regard every profession as a trade—an agency for supplying some particular want of the body politic.

It was early in my professional life that I found myself in London, invited to undertake the responsible position of physician to the Royal Pimlico Dispensary, a charity modelled after the old-fashioned system, and very perfect of its kind. The regime may roughly be described as follows :—Its income was exclusively derived from voluntary contributions. The right of admission to its benefits was obtained, not by a money payment, but by the possession of a letter of recommendation, involving the sociably degrading and, to the sick man, the wearisome ordeal of begging in the first instance, and subsequently of attendance in a crowded waiting-room, with other defective arrangements justifiable only on the plea of necessity. The Institution was, however, very comprehensive in its aims. It endeavoured to supply the poor of that neighbourhood with efficient medical aid in all its branches, including home-visitation whenever necessary. It was not intended for paupers, but owing to the inadequate Poor Law system of medical relief then existing (1852), it was compelled to deal with many cases falling outside of its proper sphere of operations. Neither was the care of the moderately well-to-do its object; yet, as it increased in efficiency, it became, at least proportionately, difficult to exclude this class of applicants.

In consequence of the additional strain thus brought to bear on the society, and also, as will presently appear, in great measure the result of imperfect defects of the system, the duties of the officers became from day to day more and more arduous. Hence it happened that resignations of members of the staff were frequent; specially was this the case with the surgeons, who, in addition to their other work, were called upon to undertake the lying-in cases; in fact, mainly on this account the surgeons rarely held office for a longer period than two years. Each resignation necessarily implied a vacancy and a demand for new and frequently raw material to supply the deficiency; and the supply threatened to fail under these circumstances. A thorough investigation was inevitable; a committee of inquiry was appointed. I myself, having some special knowledge¹ of this subject, and also as a physician, being a disinterested party, acted as secretary. The question was in the first instance simply one of relief to the surgeons, and to them of relief from a certain portion only of their duty. To effect this two courses were possible. On the one hand, the undue pressure might be removed altogether by excluding all lying-in cases. But by the acceptance of this plan, the character of the Dispensary for completeness must needs suffer. On the other hand, the desired

¹ I was at the time assistant-physician accoucheur to the Westminster Hospital.

relief might be obtained without the imposition of any restriction by the employment of midwives, and thus leaving to the honorary medical officers merely the labour of supervision. But to the adoption of this course there was a very serious objection—lack of funds. The Dispensary, notwithstanding the fact that it was served entirely by volunteers, was year by year overcast with the shadow of impending bankruptcy. In truth, insolvency was staved off only by the proceeds from an annual sermon preached to a neighbouring and wealthy congregation, and followed, of course, by a collection. Any further addition to the expenses was therefore, under the present system, not to be thought of.

At this juncture, most opportunely, my attention was drawn to a solution of the difficulty in a letter sent to one of the medical journals. The writer, who was, I believe, Mr. Smith, of Southam—a name which should not be forgotten, inasmuch as his system is now becoming very generally adopted—advocated the establishment of dispensaries on an entirely new basis. Instead of the old system, with its list of subscribers and its periodical appeals to the public at large, he recommended that the patients should themselves provide their own medical aid. The scheme he suggested, obviously founded on the method already pursued by Sick Clubs, but as obviously superior to it in many points, was shortly the following, which is known as The Provident System :

Every man desiring medical aid for himself was required to contribute, commencing in time of health, one penny per week; in virtue of his subscription he was enrolled as a free and benefiting member. If married he might secure the same boon for his wife by the payment of an additional penny, and for his children a halfpenny each was requisite. But for the children, however numerous, not more than twopence was to be demanded; so that for the weekly sum of one penny, in case of an individual, or not exceeding in any case fourpence, a whole family might claim medical aid such as the old-fashioned dispensary offered, and free from some of its drawbacks, and more complete than the club system.¹ Additional honorary subscriptions were required, but only to a comparatively small amount; and these were valued, not so much for the pecuniary aid that they gave, as that the money carried with it the promise of that goodwill

¹ The Club provides medical aid for the man only, and it gives him no choice of doctor. He must have the Club-doctor, which is to him a very different thing from having his own doctor, and this accounts for the disparaging way in which the Club-doctor is spoken of. He is "only the Club-doctor!" The new "friendly societies" system, which provides for the wife and children, does not attempt to give each member any choice. There is only one doctor.

and readiness to help in the administration which is often of infinitely more value than the mere money payment. Such was, in outline, the main feature of the new system; and Mr. Smith could quote the experience of twenty years' trial at Coventry in proof of its being practicable. It had also been tried for the same length of time by Mr. Jones, a well-known and most benevolent surgeon in Derby, who seems to have worked out the idea independently.

Now that which concerns us more especially to note is, that the success obtained is by the application of a new principle—the principle of self-help; and that in the special form of providence. That these institutions become thereby nearly self-supporting is of secondary importance; but this fact serves, as in the case of the Royal Pimlico Dispensary, the useful purpose of attracting attention to the system.

The position of the committee at this time may suggestively be described by a reference to the history of railways. It was in their early days, when accidents were not unfrequent from breaking of the rails. These were originally made of cast-iron, and they gave way of course mostly where the strain was greatest, where the lines were on a curve. But, then as now, when an accident happened a special committee was appointed, and careful inquiry was made, to ascertain if possible the precise cause of it. Robert Stephenson was the chairman of one of these committees, and the evidence went to prove, without doubt, that cast-iron rails would not bear more than a certain limited weight of traffic, nor allow travelling at greater speed than twelve miles an hour. He was himself a cast-iron rail manufacturer, and, as it happened, had at that very time a large contract in hand. His position was a critical one; but, fortunately, he perceived that it was a crisis also in the existence of railways. Had he listened merely to the voice of self-interest, he would have been deaf to the evidence now before him; and we might still have been carrying our heaviest merchandise on the turnpike road, and travelling ourselves at no more than twelve miles an hour. But his motto was, "*Fiat justitia ruat cælum.*" He rose to the occasion. Self was subordinated to the requirements of the business in hand. Cast-iron must give place to wrought-iron, even though his whole establishment had to be remodelled, and the contract to be cancelled. Thus the railway accident was made the occasion for a new departure in railway life. Since then wrought-iron has had in its turn to give place to steel.

"*Mutato nomine de te fabula narratur.*" Thus far, at least, the parallel holds good. The old-fashioned dispensary was giving way where the strain was greatest; a committee had been appointed, and the discovery had been made of a new system, which would, if adopted, remove the difficulty completely.

Money would be forthcoming, not only for the payment of midwives, but also for the surgeons; nay, further, physicians would not be allowed to work any longer "for nothing." But at that time such an unlooked-for result, such a departure from received notions, was more than the Royal Pimlico Dispensary could receive.¹ It was, indeed, a shock to my own notions of propriety, but happily I had learnt in the school of Social Science, that a principle, if it be a sound one, may be trusted; though perhaps it was as well that I did not then know to what great lengths this trust would lead me. It was enough that I was prepared at once to commit myself so far as to enter upon an unbiassed consideration of Mr. Smith's interesting experiment.

The original committee was therefore dissolved; but a certain number agreed to carry on the inquiry, and they were joined by others whose counsel was very valuable. I cannot easily forget the encouragement and help that was given by such men as the now eminent surgeon, Sir Spencer Wells, and the late Dr. A. P. Stewart, whose large-hearted benevolence, tempered by comprehensiveness of judgment and strong common-sense, were sometimes needed to keep in check the enthusiasm of some others. From Dr. Stewart I obtained a large mass of information upon a collateral question already reverted to, which had been gathered some time previously by an "Advice Gratis Committee," appointed by the Metropolitan Branch of the British Medical Association. This, though for our present purpose of little use, brought us incidentally into relation with others of mature judgment, and served no doubt the useful end of preserving us from drawing conclusions too hastily. The course now followed was that which the Bishop of Worcester pointed out in his memorable sermon,² preached before the Social Science Congress at Birmingham, as the one which ought to be taken in this as in all other sciences:

"Collecting the facts with care, arranging and classifying them, and finding out (thereby) sequences of cause and effect, and testing by experiment."

The first step was to apply to those Provident Dispensaries already in actual operation for information, in order that, by the comparison of differences as well as similitudes, as Bacon has it, a true estimate of the practical value of the new system might be arrived at. Reports were obtained from all the then existing Provident Dispensaries; amongst others, from Boston, Brighton, Coventry, Derby, Northampton, Nottingham, and St. Pancras. Some of these institutions were flourishing, others had become

¹ The Dispensary many years after this was remodelled, and is, I believe, on a provident basis.

² THE CHURCHMAN, September, 1882, page 457.

already extinct. Upon these latter special pains were taken to discover if possible the causes of failure. Moreover, an endeavour was made to get a continuous series of the reports of each from the time of commencement—a period at which new brooms, especially charitable brooms, are wont to sweep clean—onward till the time when the fresh zeal of the promoters may have given place to the less fiery ardour of successors. As a matter of fact, Coventry was the only one that supplied the required information in its entirety, and the facts were so interesting that I have from time to time continued the record, extending it to thirty-eight years. It will be found worthy of careful examination. The headings of the different columns were selected with great care. They have recently been adopted by the London Charity Organization Society, with a view to secure uniformity in the mode of keeping the records of such institutions. Those who have made the experiment of trying to compare the reports of similar institutions, each one keeping its records without any principle for guidance, will understand something of the labour entailed upon the Committee, and will not criticize very severely the incompleteness of this endeavour. The following remarks upon some of the headings will make more clear their value; and a comparison of the results from Coventry, with similar results recently obtained from Northampton and Derby, cannot fail to increase the interest awakened.

The restriction in the number of the medical men (heading II.), and also in the number of those who are permitted to become free members (III.), is the first and one of the most important facts in the whole table. There is no very obvious reason why the services of any legally qualified practitioner should be declined. Even in Derby, where the number selected is eight, an explanation of the reason for the limitation ought to be forthcoming. There is some semblance of injustice in excluding any, unless a good, a very good reason can be given; and I venture to add, unless a better reason can be given than the one that is usually put forward. It is a very lame answer to say that the rule is one that is approved by the two, three, four, or even eight doctors who belong to the dispensary; the question rather is, what do those think who are *not* connected with it? Similarly the limitation in the number of free members (III.), at first to 2,500, then successively extended to 3,000, to 4,500, and 5,000, with (let it be noted) an addition of one to the medical staff, though explained by saying that it is necessary, because for the sake of the poorest a minimum scale of payment has been adopted, is not wholly satisfactory. The question still remains, Why cannot others, who are able, be allowed to pay more, if they are willing to do so? Until this question is answered, the limitation should be acknowledged as a defect, for

Compiled from Reports of Provident Dispensary at Coventry and other places.

Age of the Dispensary and Date.	Number of Medical Officers.	Number of Free, or Benefiting Members.	New Members, inclusive of V.	Members admitted when sick on payment of deterrent fee.	Cases of Sickness.	Cases visited at home, exclusive of VIII.	Lying-in Cases.	Deaths.	INCOME.		EXPENDITURE.				
									Honorary Subscriptions and Donations, Funded Property, etc.	Payments of Benefiting or Free Members.	Honorarium to the Medical Officers.	Salaries to Dispenser, Collector, Midwives, and other Assistants.	Rent, Rates, and Taxes, Furniture, Repairs, etc.	Drugs, Instruments, etc.	
I.	II.	III.	IV.	V.	VI.	VII.	VIII.	IX.	X.	XI.	XII.	XIII.	XIV.	XV.	
									£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	
1st year, 1831-2			..	..	1500	..	10	19	328 12 0	126 7 11	80 17 8	67 8 0	27 9 10	45 10 3
2nd " 1832-3			..	..	2437	..	55	30	140 4 6	866 3 9	263 1 5	77 7 1	31 7 0	103 2 4
3rd " 1833-4			..	..	1668	..	52	20	144 9 7	400 12 0	268 0 0	72 18 4	25 6 10	112 12 0
4th " 1834-5			..	..	1624	778	47	27	117 16 2	415 13 1	287 1 0	67 7 6	43 4 0	88 11 0
5th " 1835-6			..	..	1500	..	41	17	127 18 4	397 9 3	262 3 0	71 14 3	26 11 5	95 6 3
6th " 1836-7			..	..	1610	..	53	28	106 14 8	392 2 1	261 15 0	73 16 11	22 9 6	90 7 1
7th " 1837-8			..	..	1882	..	31	26	138 5 9	339 5 3	245 1 8	71 19 11	21 8 2	54 3 7
8th " 1838-9			..	..	1638	..	48	34	88 9 1	426 3 6	287 2 8	68 16 0	22 15 0	99 1 0
9th " 1839-40			..	..	1921	..	39	39	85 10 1	423 14 8	304 17 8	69 9 6	23 11 2	83 17 0
10th " 1840-1			..	..	2001	..	51	37	92 4 9	436 15 0	287 2 4	61 10 0	20 14 10	109 12 8
Average of the first 9 years next after the first	Two	8000, limited at first to 2500	..	..	1768	..	46	28	115 15 0	400 6 6	274 0 6	70 10 8	26 7 7	92 10 2
Averages of 5 years:															
1843-8			..	..	2069	..	58	31	98 14 11	430 5 8	280 5 4	63 2 11	11 0 1	82 15 0
1848-53			..	..	1877	..	..	36	67 2 8	355 18 10	237 16 7	66 16 10	12 2 10	74 18 1
1853-8		4500	872	122	2445	716	33	49	64 17 8	580 4 4	385 6 3	83 12 0	13 12 0	125 12 0	
1853-63	Three	5000	541	104	2965	916	39	58	61 11 2	715 4 3	463 18 6	94 15 8	45 18 3	142 16 0	
1863-8		5000	597	81	3037	815	50	45	71 5 9	721 19 6	467 12 6	72 19 10	18 7 9	184 0 4	
1831-83 ¹	4 & midwives	15000 ⁴	2338	253	..	..	..	..	49 13 0	1685 10 7	1181 12 8	330 14 4	128 15 0	357 13 0
1878-82 ²	"	19715 ⁴	2731	383	..	..	537 ⁵	..	181 12 7	2562 8 5	1912 18 6	372 13 2	101 11 7	859 15 4
1878-82 ³	Eight	5433	1789	1162	..	..	9	..	59 8 11	1082 10 7	620 11 6	245 18 7	62 7 7	154 16 6

¹ Coventry.

² Northampton, founded 1844.

³ Derby.

⁴ These numbers, especially when taken with the small number of the medical staff, ought to be explained.

⁵ Viz., 351 attended by surgeons; 186 by midwives.

it is one. In the absence of any other reply, Social Science would note that these two limitations are interdependent upon each other; and, which is a much more serious aspect of the question, that the limitation in these fundamental particulars must of necessity be followed by limitations all through. This explanation, also, is sufficient to account for the fact that provident dispensaries, at their best, have never risen above the level of respectable mediocrity; and also for this other remarkable circumstance, that even now, after fifty-two years trial, and though such striking results have been obtained as are set forth in this table, it is still a moot-point in many places whether the old-fashioned pauperizing and inefficient dispensary system ought not to be maintained.¹ Moreover, even if all these dispensaries were remodelled on the provident basis, there would yet remain the hospital *out-patient* department, which is the old dispensary system, only less efficient, for in it the defects are allowed to run riot without any attempt being made to keep them within bounds. Hence, the spirit of congratulation with which reference is commonly made to mere numbers of patients, whether attending at a hospital, or even enrolling themselves as free members in a provident dispensary, should be carefully watched. There is a fearful irony in "so many patients seen," when it means at the rate of 40 per hour.²

A somewhat similar scrutiny should be instituted in regard to new members (IV.). The average number of free members (III.) being the same year by year, it is obvious that "new members" added represents the same number of old ones who have left. Change of residence may account for a large proportion of these, also perhaps improvement in circumstances for a few more; but when the ratio is, to take the lowest computation, one in ten (it is sometimes as high as one in three), there is a large margin left, which, if not otherwise explained, must be put down to a certain degree of dissatisfaction. If, for instance, one of the medical officers takes charge of a greater number of members than he can possibly attend, and delegates this duty to an assistant, and even to one who is not legally qualified to practise, the law "TENDENCIES TELL" (Vol. VI. CHURCHMAN, p. 462), will expose this abuse, and the managing committee ought not to overlook it.

The number of members (V.) admitted when sick is remarkably small. This is one of the best features of the Coventry Dispensary. The fee or fine demanded, though small, is obviously deterrent. Where it is not so, the amount ought to be increased. Each one that is admitted when sick, would otherwise be an advertisement to all his acquaintance, that they need

¹ This was the decision very recently in Leeds, for instance.

² I have often been obliged to travel over the ground at this pace!

not be provident. In the early days of provident dispensaries, the honorary members were allowed a certain number of letters of recommendation for these persons, but this "privilege" was soon withdrawn as being wholly alien to the fundamental principle of the institution.

Under the division Income, each of the headings is full of interest, both in respect of the amounts and of the objects for which the money is contributed. As to the amounts, it is not easy to say whether of the two is the more gratifying, the smallness of the one (X.), after the first year, or the largeness of the other (XI.). But in each there are other noteworthy features. As regards the subscriptions and donations, the point of most importance to be mentioned is that the principle of charity is here in full exercise, and that it is charity of a type far higher than is the ordinary subscription to a free dispensary. The donor receives and asks for no return, except the assurance that the money is properly spent. If so be that his bounty can even be so concealed as that the recipients are not conscious of its exercise, this will be the very perfection of charity.

The payments of the free members (XI.) will naturally be thought worthy of most attention. Indeed, but for the considerations urged under headings II. and III., the folly—a stronger word might be used—of those who, in the face of these figures, persist in supporting the old-fashioned kind of dispensaries, and of continuing the out-patient department of hospitals, under the plea of necessity, is inconceivable. Fifty, forty, thirty, even twenty years ago, some such plea might be urged. The poor-law system of medical relief was utterly inefficient, and the power of provident self-help was comparatively unknown.

But here also, though as in Northampton the amount contributed is £2,562 8s. 5d. per annum, Social Science insists that there is another side of the question. It would argue thus: "If so great a result has been obtained by the introduction and the application, in a limited and restricted fashion, of one new principle, and seeing that the limitation introduces certain immediate defects, how much more might be done, and how much better, if that principle were set at liberty, and if free play were given to each and every other (sound) principle (and there is at least one other that may be discovered in these very figures), which is capable of application to the business in hand." This was the conclusion at which the new committee arrived, and many months were expended in the attempt to devise a practical scheme in accordance with it: and though the scheme has even yet to be tried, there is gradually an advance being made, and there are signs, not a few, that when the community is better instructed on the general principles of medical aid, and specially upon the power that lies unused but suited for the purpose in the prin-

ciple of prevention, results will be obtained (and that mainly by the contributions of the patients themselves) which will as far exceed anything done at present, as does the present exceed what was done fifty, or even twenty, years ago.¹

Under Expenditure I shall not refer at length to any other item than that of the honoraria to the medical officers (XII). It follows as a necessary consequence that, if the patients pay, the doctors must be paid. But in doing this, some very nice points involving questions of great delicacy arise, which, if not considered, will work themselves out in some form of defect. Ever since the fall of our first parents, things left to themselves go wrong, and it will be so till the "times of the restitution of all things." Therefore, in the first place, let it be noted that the payment to the doctors is not payment in full. The other headings (XIII., XIV., XV.) are payments in full; not so that to the doctors, even though it amount to £1,912 18s. 6d. per annum (Northampton). It is an honorarium, accepted as payment in full, in consideration of the circumstances of the patients. More than this, if the doctors discharge faithfully their duty, first to the free members by doing what they promise; next to their brethren (by not sanctioning undue limitation in the staff), not otherwise, they are exercising charity in a yet higher form even than the ordinary honorary members. Whether it be so or not will depend ultimately upon the individual medical man; and it is not for us to judge; but it is clearly the duty of promoters to provide that the arrangements be made according to this high conception of duty. This seems to me best provided in the Coventry rules. In other provident dispensaries there are made certain first charges in full upon the funds, and *the residue* is divided amongst the medical men. In Coventry the free members' payments are first divided into three portions; of these two, or thereabouts, are set apart for honoraria to the doctors; the other third is devoted to working expenses. Strictly speaking the subscriptions and donations should be administered in the same way: two-thirds ought to be scrupulously set apart for the medical men, and a third only spent on administration; but the principle—payments of free members in proportion to their ability, accepted as payment in full; and again, payment to the doctors of a

¹ See "Paper on Preventive Medicine, read at Meeting of British Medical Association" (Manchester, 1877). *Brit. Med. Journal*, 1878, pp. 86, 198, 321. The principle of providence, applied to dispensaries, has been compared to the change in railways from cast-iron rails to wrought-iron. The principle of prevention, applied to medical aid in general, including hospitals, dispensaries, and private family practice, will be as the further change from wrought-iron to steel. This is also recommended by the Registrar-General in the "Supplement to Twenty-first Annual Report," p. xlii.; and in the "Thirty-fifth Annual Report," p. lxxx.

definite proportion, and not a residue—is even, as at present, sufficiently manifest.

These remarks might easily be extended, but enough has been written for my purpose, which is not merely to give facts about provident dispensaries that may be useful to those who are called upon to decide whether or not to establish one; but in proof of the action of law, and thereby to establish my contention that Social Science is a true science.

The law of tendencies, in the first place, is seen in operation at every step, but in a form different from any previously given. The tendencies here set forth are principles. Principles are the forces of Social Science; and the following general conclusions respecting them may be gathered from the illustrations that have been given in this and in previous articles.

1. Every transaction is the result of the operation of a number of different principles, and so far as success is obtained it is by the application of principles which, either by experience or by Revelation,¹ are known to be good.

2. Each principle produces its own effect, and none other. The effect is often not immediately visible; it may be concealed by the simultaneous action of some other principle which is antagonistic. This holds true of bad principles as well as good.

3. If any one of the many sound principles that operate in a transaction is in any way violated, either absolutely by neglect or relatively by arbitrary restriction—the restrictions being imposed either purposely, by prejudice, by thinking to “save trouble,” etc., or unconsciously through want of experience, through oversight, etc.—violence, more or less, will of necessity be done to each and every other of the sound principles that are involved. Conversely, if any one (sound) principle is faithfully and fully maintained, every other (sound) principle will be so too. Such is the wondrous harmony of truth. That which is wrong in any one respect cannot be thoroughly right in any other respect. *An end cannot justify the means.*

4. That as to results, failures are more instructive than successes. Failures show where laws have been broken. Successes may be hidden failures.

5. That in the application of the law of SINGLENESS (see CHURCHMAN, p. 418), another law must be observed, which, for want of a word in English, I must call

THE LAW OF EIGENSCHAFT,

or the law of individuality and propriety.

Just as each individual has his own duty to perform, each association of individuals has its own proper function; and in

¹ If Revelation is (or seems to be) contradicted by experience, either the revelation has been misunderstood or the experience brought to bear upon it is too limited.

both cases that particular business is what has to be done, by the individual and by the association respectively, with "singleness." In regard to the individual, it is not always easy to determine what is, and what is not, his business. So also in an association, experience is often necessary before the full discovery of the "Eigenschaft" is made; and, therefore, before the fully efficient means are used for its accomplishment. The failure in the old-fashioned dispensary, failure in the first instance to retain the services of efficient surgeons, when investigated, brought to light, by successive steps, other failures, which were ultimately traced to imperfect apprehension of what is the "Eigenschaft" of a dispensary—an institution for the supply of home-medical aid for the working classes. So also when provident dispensaries came to be submitted to the test of efficiency, failures were discovered; and these again were seen to be due to the same cause. A passing glance was taken at hospitals, just sufficient to show that the same is true of them. In whatever respect there is manifest failure, it is through imperfect conception of the "Eigenschaft" of a hospital, which should be strictly supplementary to home-medical aid. And yet further, the remedy was to be found in the application of a principle which had been hitherto neglected, and which is a fundamental one, according to the most advanced teachings of medical science. Hence, generally, in every business, the first necessity is to determine the "Eigenschaft," and the results obtained will show precisely how far the determination has been a correct one.

This law will be still better understood by a brief account of the formation of a Nursing association, in which the "Eigenschaft" of nursing was carefully kept in view.

The Crimean War, and the fearful sufferings of our soldiers from the absence of nursing, called forth the heroic energy of Florence Nightingale; and the success which attended her almost superhuman efforts was the means of directing attention to the question of nursing. There had, indeed, been efforts made before, notably by sisterhoods; but they had failed, and they failed through the non-observance of these two laws: the laws of "singleness" and of "Eigenschaft." This remark also holds good of all kinds of ecclesiastical nursing organizations, whatever be their names. The following is an instructive example of this.

In the autumn of 1864, a proposal was made by the Rev. J. E. to establish a Nursing Association for the diocese of Lichfield. The scheme was very complete ecclesiastically. There was to be a branch in every town and village. The clergyman of each parish was to be *ex-officio* the prime mover, and the bishop head of all. Many considerations could be urged in favour of such an organization. Who could be more likely to know of fit

persons to be trained as nurses? Who more likely to know where nurses might with advantage be employed? Some one possibly might suggest the doctor rather than the clergyman; but this aspect of the question, though so natural, was not at that time so obvious as now. Strange as it may seem, the importance of good nursing was urged upon the medical profession from without. It was a private lady and not the medical staff who first moved and then organized nursing for the army. On the other hand, neither was it as a "sister" that it was done. It was a woman simply acting instinctively under the guidance of the law of "singleness" and of "Eigenschaft." By the same instinctive guidance, when the diocesan scheme was submitted to the public, it was condemned. The proposal, however, served a good purpose; the necessity for some agency was fully and ably set forth, and the violence with which those were assailed who ventured to object to the ecclesiastical machinery, served still further to open the eyes of people and make them think. So at length, after giving the promoter six months to re-consider his plan, inviting him to friendly conference upon the question, an association was formed, not for the diocese, but for the county; not upon Church lines, but upon lines indicated by the "Eigenschaft" of nursing. The object was defined to be (1) to provide thoroughly educated (*i.e.* trained) nurses for the sick, both among the poor and in private families; and so as to cover the whole ground (2), to organize means which shall tend to the prevention and more or less directly to the removal of disease.

The time was spent (as in the previous instance, when provident dispensaries were under consideration) in collecting reports, and in many cases in personal inspection of existing nursing institutions. Two in Liverpool, one in Bath, one in Clifton, were at that time almost the only agencies for nursing in existence; except sisterhoods, and these were not willing to be interviewed. Sisterhoods would supply "sisters," who would be under the direction of the "mother-house;" but their rules, spoken of by some of them as "counsels of perfection," were "not intended for the public!" The result of this preliminary inquiry was, that we learnt what to avoid as well as what to imitate, and in a few particulars we saw wherein improvement might be made. For instance, though not ecclesiastical we wished to be avowedly Christian; and in regard to the business itself, the well-being of the nurse, though carefully considered, was never put first in order. The common rule, for example, of removing a nurse to another case at the expiration of three months was *not* adopted, simply because such a rule would not be making the nursing the first consideration. As to the organization adopted, it was natural, growing out of the work itself; not artificial, *i.e.*,

not adopted from some other kind of work. The nurses are not "sisters," but simply nurses, keeping their own Christian names and surnames. Their dress, though uniform for convenience, is not at all conspicuous but cheerful, and chosen from time to time as that which is best adapted for service in the sick-room. The religious character of the work is maintained and is confessed, not obtrusively—this is purposely avoided as tending to foster pride and self-importance—but practically and in the simplest way possible. Women of decidedly Christian character, "who are willing to conform to the regulations of a well-ordered Christian household," are sought for, and find in the institution a home. A certain number of them—those who are found to be specially fitted for that kind of nursing—are employed, not as parish, but as district nurses.

Every question as it has arisen has been submitted to this simple process of examination. Is it nursing? If not, take no notice of it. If it has to do with nursing, the next inquiry is—Will it tend to good nursing? If so, adopt it; if not, reject it. In one sentence, "singleness" of aim, with thoroughness in execution, has been the endeavour.¹ The result, after eighteen years' trial, may be summed up in a few words. The staff numbers in all seventy-one. In the last year the nursing done for the rich is represented by £2,258 16s. 10d., and £648 6s. spent in district nursing may be taken as proof that the poor are not forgotten. The diocesan scheme, after twelve years, died out, and very handsomely paid over to the County Association the balance of £4 3s.

In this history, also, another very important law may be seen in operation—

THE LAW OF PROCEDURE.

The "Eigenschaft" determines what aspect of a question is to be considered first. That which is first in importance is not necessarily to be first in order. God's providence determines the order. The question of relative importance is perhaps better, in nine cases out of ten, if not raised at all. The words "Seek ye first the kingdom of God and His righteousness" are generally understood to mean, "Attend to spiritual needs first in order." But it cannot possibly mean this: our Lord did not so; and this interpretation is not in accord with other passages, such as: "Study to be quiet and to do your own business;" "Whatsoever thy hand findeth to do, do it with thy might;" "Whether ye eat or drink, or whatsoever ye do, do all to the glory of God;" and "If thine eye be single"—not one eye, nor two eyes looking in different directions, which is squinting, but two eyes both

¹ "Hints on the Formation of Nursing Institutions." "Fourteenth Annual Report of the Derby and Derbyshire Nursing and Sanitary Association."

directed to the same object—"thy whole body shall be full of light." This last passage is a complete epitome of Social Science.

These four laws—the laws of tendencies—of singleness—of eigenschaft—and of procedure are, if they be true laws, sufficient to establish my position that Social Science is a true science. The practical bearing of these laws upon our duty as churchmen is reserved for a fifth, the concluding article.

W. OGLE.



ART. VI.—FORCE, MATTER, AND ENERGY.

MUCH is heard in these days of the Conservation of Energy. It is often referred to as a great result of modern physical science, and sometimes with the suggestion, triumphant or uneasy, as the case may be, that it is inconsistent with the reality of free will, and, therefore, with the truth of religion. I have reason to know that this latter view prevails with some men of the highest intellect and culture, and induces them to regard the conservation of energy as something which ought not to be true, and which probably is not true. At the same time, the proof of the theory is generally looked upon as something so abstruse, and requiring so extended a knowledge of mathematics, as to be quite beyond the reach of ordinary men.

It is my conviction, on the contrary, that not only the true meaning, but also the proof of this doctrine can be made tolerably clear to any man or woman of fair intelligence and education; and still more is it my conviction that its truth, which, in common with all physicists, I firmly hold, has no bearing whatever adverse to the truths of Christianity. On the contrary, the principles on which the theory is based may, I believe, be used to bring before our minds fresh and striking views of those great facts which we vaguely denote as the Omnipotence, Omniscience, and Omnipresence of God. The present article is the outcome of these convictions.

All facts which we believe, the conservation of energy not less than others, must rest upon the ground of evidence. Again, this evidence itself must rest upon other facts or beliefs, as each successive story of a building rests on that below it. Thus, pursuing our course downwards, we must arrive at last at the solid earth—that is, at some fact or facts which require no evidence to support them, which are so certain as to carry their own witness with them, which, in one word, are self-evident. It is clear that this must be so, otherwise our building, if not infinitely high, must ultimately rest on nothing. If so, it is ob-