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EDITORIAL

Saving Our Lives.*

When the bullets were flying around Chengtu last fall people tried to keep out of their way. They preferred to live a little longer. When there are floods in a river valley the inhabitants seek the highest eminence for themselves and their families to save their lives. We sometimes say, "I would not do that to save my life". We mean that nothing could persuade us to do that thing. Life does not always promise health or happiness. Indeed it may seem to contain only distress of mind and body, but the urge to be alive normally makes people endure great suffering. At times people are so desirous of living that they will kill their fellow men that they may have extra sustenance for themselves. Fear of death may make cowards of us all. That is personal physical death.

A group of people come into power and they create class injustices and acknowledge that in so doing they hope to save the existence of their group. So it is with the workers in Russia, capitalists in the United States and militarists in China.

Nations want to live and they build battle ships and bigger guns than have ever been made before. They do this because they have inherited a tradition that in

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this way an historic entity may be maintained—that the life of a nation may be saved. And the lives of these people, these groups, these nations are to be saved for what purpose?

Our teachers whom we honor, have not taught us in this way. Christ said, "Whoever would save his life shall lose it, and whoever would lose it for My sake shall find it". A Chinese philosopher has remarked, "T'o sen, sha sen". Aristotle defined barbarians as people who "insist on doing what they please without submitting to any rule", or a man with no discipline in his life.

They are hard words. How do we save by giving, and why do we die when we cling desperately to our kind of life? And can only the disciplined person be really great? There are people who believe these words and act on them. They jump into swift waters to save the life of a total stranger, and forget their own danger. Doctors have deliberately taken disease germs into their own systems because they wished that others might learn to save lives. Many people deprive themselves of the necessities of life to save others. Records of all pioneering efforts—the people who travel to the ends of the earth who make revolutionary contributions to science—their records thrill us with stories of heroism, of lives not counted too dear unto their owners.

Groups of people have set strict limits to their activities in order to make life together with other groups possible.

Even nations are beginning to say, "See here is a way by which we may live together. The price we have been paying for our separate lives is too great" One man says, "Internationalism is the price we must pay for nationalism". That is, we are to save our national life by merging it in the life of the world, by seeming to throw it away.

What is it that we lose by saving and find only when we have shared?

Friends, for instance. Some people put circles around their friends and say, "Don't you step out of that circle, don't write notes to other people, don't study with other people. I am the only person to cross that circle into your friendship". What happens? That friendship becomes poorer, not richer. If my friend helps me to like and understand other people and always more

people she is a good friend. It is rather a chilly world, and friends are a warm comfort. It would be a pity to lose one because we held him or her in too tight a grasp.

Stored goods create no happiness. They make us to be objects of envy but not of love, unless we can associate them with people who have shared their use and beauty. What fun is there in a good book if you never talk with anyone else about it.

How about English words which are safely stored in your mind? They need to be brought out or they are lost. There are English words I never can remember, because after I have looked them up I never use them. Teleological is such a word that comes to my mind now. I wonder how many times I have looked up that word. I don't know what it means now. I have never used it.

Does this giving and sharing mean the surrender of the inner places of the mind to every acquaintance? Far from it. Without that place of retirement for our times of solitude, we have nothing that anyone wants, nothing that is worth the giving. It is as if you insisted on playing the piano for me when you never have hours of solitary playing to yourself.

Some things are too precious to be shared, you say. And that is true. Too precious to be shared with whom? Too precious to be shared with people who can't appreciate them. I don't give my best dishes to a baby to play with. You don't share with me beauty which I am incapable of feeling. If we do not have a quiet place within us we have nothing to give and don't know enough to receive. Perhaps this is part of what Christ meant when he said, "To those who have shall be given". To those who have and share what they have to them will be given greater opportunities of sharing.

And how about the things that are too bad to be shared? Measles? I don't want them. Lies? You may keep them.

There is a nice discrimination to be practised in these matters. A servant gave a baby a box of matches to play with. The child's father remonstrated. The servant replied "T'a yao". You don't give only because some one wants. You don't give only because you have. Advice for example. Perhaps I am not ready for your advice and probably I don't want it.

You can't play tennis without long practise. Going

to a university does not make you a scholar. You and I might try to give or receive that which tears down body and soul. And the fault is not in the act of sharing but that we have tried to make use of a fine art—the very fine art of giving—and we bungle because we do not practice day by day.

These are personal matters. There are social situations where we may lose what we would save. I will suggest but one. The owners of factories make shoes or glass or cloth, and try to save their money by paying very low wages to employees. When the wages are so low that people can no longer afford to buy shoes and windows and clothes, the factories shut their doors. The owners collapse together with the people whose interests they might have saved by sharing their own.

Japan has pled that Manchuria is necessary to her existence. She must have it to save her life. But there are evidences that she may be losing the best that any nation can have—the loyal trust of her citizens and an honorable place in the family of nations.

People said that Jesus lost His life on the cross, but the cross is a symbol of triumph and faith, the sign of a new life not a lost one. I think that Christ must have first lain down his life at the beginning of his ministry. He must have had a struggle to lay down ambition, vanity, jealousies and economic and social security. He was fit for immortality and found it because he lost those selfish qualities that the world holds so dear. We, you and I, cling to them and we miss being great. If we could believe those teachers who tell us that we shall lose our larger life if we try desperately to save our petty little lives, we would be whole people, made whole by the wealth of what we have given away.

One word more. There is only one thing which I may give to you. If the gift without the giver is bare there is only one great gift which you may give to me, A generous share of that combination of thoughts and impulses and actions which is you, and makes you different from the person next you, different from any who have gone before you or will come after you. Would you save that gift of life? You will lose the best the world can offer. Are you willing to lose it? You, too, may be of the immortals.

NATIONAL HOSPITAL DAY.

May 12th is the anniversary of the birth of Florence Nightingale. In commemoration of her work in hospital reform, that date is designated as "National Hospital Day". The hospitals will then open their doors to the public, inviting them as guests, to inspect them. Many thousands of people will accept this invitation. They will be impressed deeply and favourably by the cleanliness, the orderliness, and the efficiency of these institutions which offer to the sick and injured of our country such unexcelled service.

You will appreciate the modern hospital more if you have some idea of the humble conditions from which it arose. The natural tendency is to regard the presence of a hospital as a matter of course and to assume that it is always clean and efficient. Such is not the case. The theoretical principle upon which the hospital is conceived is ancient, but the type of service offered by the hospital to-day is of very recent origin.

So that one may see the hospital of to-day in its true light let us have a brief description of some of former times. Let us start with an institution among the Babylonians in the very ancient days which date from about the time when the Egyptians were laying the corner stone for the first pyramid. Herodotus, the Greek, tells us of the ancient hospital system used long before his time in the cities of Babylonia. He says:

"They bring out their sick to the market-place, for they have no physicians; then those who pass by the sick person, confer with him about his disease to discover whether they themselves have been so afflicted or have seen others so afflicted. And then the passers-by advise the sick one to have certain treatments which they have known to cure such a disease in others. And they are not allowed to pass by a sick person in silence without inquiring the nature of his distemper." It is said that a little part of the past survives to-day. The Babylonian system is actively in force on the porches of summer hotels to-day.

Then Herodotus takes us to his native Greece where he tells of hospitals. There we find no hospitals in the true sense of the word, but instead, magnificent sanatoria. On the hill-sides are great temples of healing; marble buildings with col-

unined passageways surrounded by shady groves and well kept gardens watered by springs and bathed in the sunshine of the Mediterranean. In the main chamber stands a statue of Aesculapius, the god of healing; in his hand is a staff about which twines a snake—the emblem of the Physician even to this day. The sufferers who come to these sanitoria make their votive offerings to the god: they sleep in the temple and in their dreams, Panacea and Hygeia, the daughters of the god, administer to them. The next day the priests of the temple bathe them, prescribe a diet, perhaps give some remedial herbs, and offer them rest in the sunshine and intercession with the god, who is presumed to direct the treatment. These patients are not very ill, if they were they would not be there, for the priests wisely promulgate the belief that it is disrespectful to the god to die in the temple.

After a lapse of many centuries we come to western Europe to see the hospitals of which our own are lineal descendants, In the years between, the Greek sanitoria have crumbled and piles of fallen marble mark their site. The Christian religion has arisen, Rome has been over run by the barbarians. The Arabs have taken Egypt and the Holy Land. We are in the Middle Ages of European civilization. These are days of great religious faith yet at the same time of low civilization, as judged by worldly standards. Public, domestic and personal hygiene are at their lowest ebb. The walled cities are crowded and they have no sewers. Filth accumulates in the unpaved streets. The dwelling houses contain open cesspools; their rush-strewn floors are littered with refuse and in them is a pestilence of flies and vermin. Never in all history were the people as disease-ridden as in these days. Even with prodigious efforts of reproduction the population can make no headway against the inroad of disease. The population of all Europe is less than that of the British Isles alone in the twentieth century. Yet in these middle ages there are conceptions of idealistic beauty from which arises the principle of the charity hospital although the impracticability, the other-worldliness of the time, prevents the inmates from receiving any rational medical care.

The early hospitals of Europe were religious in origin. Under the Christian conception of charity it was a religious duty to provide for the welfare of the weak, the sick, and the destitute. The first important hospital in Western Europe was founded at Fabriola about the year 400. Its purpose in the words of St. Jerome was, "to gather in the sick from the streets and to nurse the wretched sufferers wasted with poverty and

disease." This hospital, and the many that came after it extended hospitalty to the sick.

The name "hospital" comes from the same source as the word "hospitality" The word was carried into the English language and either in that form or more commonly as "spittal house" was applied to all institutions of refuge; those that cared for the sick and those that housed the paupers and the insane. It is only in recent times that "hospital" has come to signify a place where the sick receive temporary aid and shelter. The word "asylum" has come into use to distinguish those institutions that provide a more permanent form of shelter.

The hospitals of medieval Europe were dark, crowded and unsanitary buildings into which all classes of the destitute were received without discrimination. The inmates were given food, shelter, and religious admonition, but no medical treatment. A great hospital of this kind, called Hotel Dieu, was erected in each of the important cities of France as a result of the movement started in the seventeenth century by St. Landry, Bishop of Paris. The true spirit of this hospital movement has been defined by Dr. John Billings, himself the designer of many hospitals, in these words: "When the medieval priest established in the cities of France a hotel Dieu, place of God's hospitality, it was in the interests of charity as he understood it, including both the help of the sick poor, and the affording to those who were neither sick nor poor an opportunity and stimulus to help their fellow men: and doubtless the cause of humanity and religion was advanced more by the effect on the givers than on the receivers."

These great refuges for the sick were crowded to overflowing, for sickness and poverty were vastly more prevalent than they are to-day. The devastating plague, the Black Death, wiped out whole towns in a single epidemic and in the intervals between its onslaughts tuberculosis took its frightful toll. Provision had to be made also for diseases that now in our country cause us little or no concern. Leprosy became widely spread as a result of the Holy Crusades. The monasteries of St. Lazarus were set aside as hospitals to care for lepers, and in France alone there were more than two hundred of these Leprasoria.

Hospitals remained under religious control until about the thirteenth century when by mutual agreement they passed from the hands of the church authorities into those of the municipalities. The care of the destitute sick then became a civic duty. The charitable spirit persisted but the medical treatment did

not improve nor did the sanitary conditions within the buildings.

Let us give some little explanation of one of these hospitals. In 1788 in Paris in the Hospital (or "Hotel") Dieu there were twelve hundred beds, each with from four to six patients. The practice of putting half a dozen patients in one bed does not seem possible to us to-day. Nor does placing fifteen to twenty infants in one long bed. In addition there were about five hundred single beds for patients, while the hallways contained another thousand lying on piles of straw in a destitute condition. One is reminded of the Men's Hospital in Chengtu last fall during the fighting. The place was overrun with vermin, while the air was so vile that the attendants held sponges moistened with vinegar before their noses. The average mortality, regardless of disease on entry was twenty, percent, while recovery from a surgical operation was in the nature of a miracle.

Dr. Max Nordau has written a description of the conditions at that time. He says: "66 In one bed of moderate width, lay four five or even six persons beside each other the feet of one to the head of another, children beside grey haired old men. Indeed, incredible but true, men and women intermingled together. In the same bed lay individuals afflicted with infectious diseases beside others only slightly unwell: on the same couch, body against body, lay a woman in the pangs of labour, a nursing infant writhed in convulsions, a typhus patient burned in the delirium of fever, a consumptive coughed his hollow cough, and a victim of some disease of the skin tore with infuriated nails his itching integument. . . ."

Please remember that this refers to a description of hospitals of only one hundred and fifty years ago—it could apply as far as sanitary conditions are concerned to a hospital of seventy-five years ago, a time well within the memory of some living to-day. But this seventy-five years has given us the greatest advances ever made in medical science.

The first of these came from the work of Florence Nightingale, the angel of mercy and cleanliness in the hospital. During the Crimean war in the barracks at Scutari, she demonstrated that the sick required fresh air, cleanliness and the attention of trained attendants. She gave us the modern trained nurse.

Next came the work of Joseph Lister, who in 1867, showed that infection in wounds could be prevented by antiseptics and cleanliness. The advent of immaculate cleanliness which

is the supreme virtue of the modern hospital dates from his time. Soon afterwards there came the demonstration of the bacterial course of disease which is the very foundation of modern preventive medicine.

These discoveries revolutionized medical care. Following them there came new treatments of disease and new methods of diagnosis. The hospital became the centre where all these changes were carried out and where all the improved methods found their greatest display. Whereas a century before, a roof and four walls with the floors crowded with beds, sufficed to make a hospital, now the finest architectural skill is needed to design the building to house the elaborate appurtenances used in the care of the sick and the extensive staff of attendants devoted to their wants. To day, less than a quarter of the space in the hospital is given over to beds for the care of the patients.

There has been another change in the hospital quite as distinct and definite as the change in the appearance of its wards. It is a social change. This is seen by the use of hospitals by non-charity patients. In the past, when hospitals were in the condition described above, none, who could afford to receive attention in the home, would go to a hospital any more than any one who could afford otherwise would prefer to live in a pauper house. These hospitals of bygone days were essentially barracks into which the destitute were dumped to die, or to recover as chance dictated. People who could afford to do so had their surgical operations at home in their own parlors, and their babies in their own bedrooms while for serious ailments they were moved into the guest chambers. Now however, the hospital affords facilities which far exceed any that can be obtained in the home. The surgeon insists that his patient goes to the hospital for operation: household surgery is no longer considered safe surgery. For the benefit of his patient the surgeon demands the presence of a trained staff of assistants and other facilities offered nowhere else than in the hospital, the steam sterilizers, the well lighted operating room, the laboratories, the x-ray equipment. Consequently the surgical hospital has been accepted as a requirement for all operations and this change has taken place within a few years.

At present we are in a state of transition in regard to the services offered by a hospital. For, while we agree that surgical procedure should be carried out in the hospital, there are some who still are reluctant to go to that institution

for the care of their infectious cases. However, we now know that the hospital is equally necessary not only for the surgical and infectious cases, but also for all medical and maternity cases as well. And the hospital must grow and build with this in mind if the people of our communities are to receive due and proper service. And to help the hospitals to fulfil this function to the utmost, it is necessary that you take a friendly interest in them.

For this reason, allow me to put to you several questions.

Do you know your hospitals?

Is your visit there only one of necessity?

Are you interested in seeing the service it offers to you and to your family?

Take advantage of the opportunity offered you by "Hospital Day" and not only visit the hospital yourself, but invite friends to go with you and see the institution which means so much to the community.

DR. HENRY T. HODGKIN.

Henry T. Hodgkin's childhood home was at Darlington, in the north of England. His ancestry was of the very best. The influences of his home were such as come only from generations of culture and Christian living. His parents periodically made the long journey to London and gave of their best to the Board and committees of the Friends' Foreign Mission Association (now known as the Friends' Service Council). Dr. Hodgkin's interest in foreign missions therefore rested upon a secure foundation.

The religious influences begun in his home were continued at Leighton Park School, near Reading, which had a strong Christian leadership and an atmosphere of culture. Graduation from Cambridge University followed. Henry Hodgkin studied medicine, for his father, Jonathan B. Hodgkin, believed that everyone ought to master a trade or profession by which he could earn an honest living. Dr. Hodgkin did

not, however, generally practice medicine. He was too much sought after in other forms of service.

Dr. Hodgkin was a leader in everything he undertook. While in England he made his influence felt in the Student Christian Movement. More than one leader in West China owes to him directly or indirectly the initial impulse leading to missionary service. Dr. Hodgkin, with his wife, Elizabeth J. Hodgkin, came to Chengtu in 1905, under the Friends' Foreign Mission Association. His arrival coincided with that of R. R. Service, who came to establish a Y.M.C.A. in Chengtu. Dr. Hodgkin's keen interest in students and their problems and his wise leadership aided greatly in establishing that Association. In the planning and establishment of the West China Union University he also performed a signal service. His knowledge of the great English universities and his keen appreciation of the strength of the English type of education were a much needed contribution to this international experiment in education. On his return to England Dr. Hodgkin became Secretary of the Board of Governors of the University, of which his experience in China and his intimate knowledge of international problems made him a valuable member.

Dr. Hodgkin's service in Szechwan occurred at a time when leaders of the missions were seeking a larger measure of unity and cooperation. He bore a worthy share in the formulation and working out of plans which placed West China in the forefront of union movements throughout the world. Those who were present will not forget his able leadership in organizing and conducting the West China Missionary Conference of 1908.

Early in 1910 Dr. Hodgkin was called to London to become general secretary of the Friends' Foreign Mission Association, a position which he ably filled for about ten years. This period of the World War threw upon Friends' a great responsibility for widening the scope of their activities and carrying out the spirit of Christianity in service to the stricken peoples of Europe irrespective of whether they belonged to the allied or to the "enemy" nations. Dr. Hodgkin led in this, seeking always to remove hatred and suspicion which were reaping so tragic a harvest. As one of the leaders in the establishment in England and America of the "Fellowship of Reconciliation" he labored both for international peace and for industrial peace through justice and fair play.

About 1922 Dr. Hodgkin received a call to Shanghai as

secretary of the China Christian Council. In this office he had a peculiarly difficult task. It was the period of intense anti-christian and anti-foreign agitation. Many non-Chinese severely criticised Dr. Hodgkin for his sympathetic attitude toward the Chinese. The peace of the world, however, owes much to the fact that in those troublous days of 1926 and 1927 there were in Shanghai and elsewhere men who could so effectively interpret to the western nations the needs and aspirations of Young China. Others attacked Dr. Hodgkin because of his liberal theological position. In reality no one could be more loyal than he to the divine Lordship of Christ. Multitudes of Chinese and non-Chinese looked up to Dr. Hodgkin as a true prophet. His writings ("Lay Religion" 1919, "China in the Family of Nations" 1923, "Living Issues in China" 1932, etc.) enlarged the field of his influence.

Dr. Hodgkin's last great project centered in America. In common with many American Friends' he had long felt the need in American quakerism for facilities for intensive study into Christian truth and life, which should avoid the professional spirit which so frequently accompanies such preparation for Christian service. The result was the establishment in 1930, near Philadelphia, Pa., of "Pendle Hill", a graduate school for quiet religious study and for thinking through the problem of how to relate religious life to the needs of our present world. Of this school, now completing its third year, Dr. Hodgkin was the director and leading spirit. How it can carry on without him we hardly know. Nevertheless we cannot but give thanks for the deep and helpful currents of influence which will continue to flow because of the life and work of this great international Christian.

ROBERT L. SIMKIN.

BUNGALOW FOR RENT

Mt. Omei. Bungalow for rent. Apply to Miss C. A. Shurtleff, Yachow, Sze.

THE USE OF HEALTH LITERATURE IN HOSPITAL AND DISPENSARY.

Possibly one of the greatest opportunities for the use of Christian literature is in the wards of the mission hospitals and in our out-patient departments. And it is a fact that in no place is this opportunity so sadly neglected. During the recent fighting in this area, when so many soldiers were sent to the hospitals for treatment, two of the missionaries made it their especial job to scatter literature daily to the patients. Just how much this played in the bringing of some of these wounded into the church is a question, but it is significant that several of the former wounded men are now regular attendants at church services. What an opportunity is missed by the pastor of the local churches, when he fails to take advantage of this chance to give men and women literature to read when they have the time. What foreigner would think of going to a hospital without a good supply of literature to read during convalescence?

There are many methods of using literature in the wards of hospitals. Despite the assertions of the Appraisal Commission, and even at the risk of running counter to their ideas, it seems to me that we would not be taking full advantage of the work of the hospital if we did not make it possible to the patients for them to get an understanding as to just why these foreigners are willing to erect, equip and operate such extensive plants as our modern hospitals are. Love in action is the fundamental characteristic of a mission hospital, but the mainspring of that love is not apparent to the patients who come to the wards, unless they are told in some definite way just what is the impetus behind that love. This can best be done by the use of literature.

To this end then, I would have placed on the head table of every bed in every ward, a good large-print Bible, which is at the disposal of the patient to use and peruse and this gives him the opportunity to ask about our religion, which will make it possible for anyone interested to tell him as much as there is time to tell. I do not mean that the doctor or the nurse should go out of their way to press the Gospel upon the

patient, but I do mean that the seed of the word should be sown in each heart or there is an opportunity missed.

Morning prayers should be optional in the hospital chapel to every member of the staff as well as to ambulatory patients. A wide awake pastor in a station will take advantage of the chances which he has to have services in the hospital. I would have a large printed hymn sheet stand, upon which the selected hymns are placed. A good movable frame can be made upon which cotton hymn sheets can be placed and rotated as needed. But there should not be any monotony in the use of the hymns. I once attended a church where we made a census of the hymns used for a year. To our amazement we found that the selection included twenty-three hymns only. The next year we had a selection of sixty-three, and we were enlarging it. But attendance at prayers or services should always be optional. If they are made interesting the chapel will be well filled. I look back upon my chapel services as one of the bright spots in my hospital administration.

I believe in fugative literature. By this I mean the kind which can be given to the patient to use and peruse once or possibly twice when it is thrown away. Such literature is not lost. I have given away thousands of such sheets and rarely have I seen it destroyed and not used. A sheet tract can be given to the patient every day and he be allowed to do as he cares with it. One will be surprised to see how many of these sheet tracts will be taken home by the patient when he leaves.

One up-and-going doctor is the author of the idea which follows. He suggests that folders be gotten out, of a uniform size and attractive cover, with suitable design upon it, and holes punched in the cover. Daily a different tract be given the patient, and each day he may place the tract or tracts so given in the folder. The average stay of patients in our hospitals is about twelve days, and by that time a patient has twelve or fifteen tracts, which when placed in the folder which is presented to him, makes a very nice booklet for him to take home. What an opportunity this offers for the placing of literature in homes where it would otherwise never be placed.

And the opportunity in the Dispensary is even greater. This article started out to deal with literature. Up-to-date it has dealt with literature in general, for what applies literature in the aforesaid, applies equally as well to the other forms of literature which might well be utilized in the hospital.

But in the Dispensary I wish to deal especially with the use of Health literature. I have always felt that the time given to a patient in the dispensary was all too short, yet one cannot give more time to each patient and cover the amount of work demanded of physician in the out-patient department. If he can find some means of enlarging upon the information which he has given a patient, with regard to his illness, he has discovered a boon to his work. I believe we have this in Health literature.

In my Dispensary work I always utilized my hospital evangelist. I kept him by my side and when I received a patient who needed hospitalization, I presented him to the hospital evangelist who very carefully and with painstaking endeavor, explained to the patient just what was his need in the hospital, what would be expected of him, how long he would be expected to stay, and the prognosis, as far as it was possible to have one made at the superficial examination which is given at first hand in a dispensary. This can all be arranged with the Evangelist if one takes the pains to explain the procedure to him beforehand, and with a few sentences relative to any case, the evangelist can give a patient a very good idea of the situation with regard to his illness. This also gives the hospital evangelist a first hand acquaintance with the patient. He is the first friend whom the future patient makes, and whom he can use in the wards when he goes there.

If the patient is directed into the drug counter for his perscription, he can be given a tract on the particular disease from which he is suffering, either on the drug counter or from the consultation desk of the physician. One way I was in the habit of doing was to have spread before me on my desk, all the health literature which I had in stock. If, for example, a case of conjunctivitis came along, I handed the man, or woman a tract on conjunctivitis, with his prescription, telling him that this was to tell him all about his disease and was as valuable as the medicine. If I did not give this information in person to the patients, it was given by my evangelist. I simply turned the patient, with the health tract, over to the evangelist who explained its purport to the patient.

Another method was to have all literature numbered and placed on the drug counter, so that when the patient went for his medicine he was also given a health tract dealing with the particular disease from which he was suffering, itch, constipation, malaria or what not. In this way the patient

was given something which was of equal value to him, and not to him alone but to those who lived in his home or his vicinity. Many times we would suggest to a patient that he take the tract home and paste it up where all in the home could see. I have seen many such tracts pasted up.

There are many other ways in which Health literature can be used in hospital and dispensary work—ways which will enhance the utilization of literature and tend to enhance the efficiency of the work of the missionary doctor.

Shall we not make a resolve that we will use more literature in our hospitals and dispensaries in this coming year?.

There was a Faith Healer of Deal
 Who said, Although pain is not real
 When I sit on a pin
 And it punctures my skin,
 I dislike what I fancy I feel.

FLORENCE NIGHTINGALE

On a morning 1889, a battalion of French soldiers drew to rigid attention. Before them stood a general and a Sister of Charity. She was Sister Maria Theresa. Here are the words of the General;

“Sister Maria Theresa; You were only twenty years of age when you first gave your services to the wounded at Balaklava, and you were wounded in the execution of your duty. You were again wounded at Magenta. You bravely nursed through all our wars in Syria, China, and Mexico. You were carried off the field at Worth and before you recovered from your injuries you were again performing your duties. When a grenade fell into your ambulance, you carried it to a distance of a hundred yards, when it exploded, wounding you severely. No soldier has ever performed his duty more heroically than you have done, or lived more successfully for his comrades and his country. I have the honor to present you, in the name of France and the French

Army, with the cross which is conferred only on those who have shown remarkable bravery in action. Soldiers—present arms;”

“The Lady with the Lamp”

Twenty-six years later, 1915, at Waterloo Place, London, there was unveiled a new statuary group, a memorial to the Crimean War. One of the figures in that heroic group was of a woman—a nurse. It was the “lady with the lamp”, Florence Nightingale. Except for monuments to ladies of the royal family, this was the first public statue to a woman in London.

These women, Sister Maria Theresa and Florence Nightingale, each typify an aspect of a great humanitarian calling. One expresses nursing as a charity; the other, a profession. Sister Maria Theresa followed in a course as ancient as her church—a life devoted to charity in the care of the sick and injured. She was only one with the many thousands who came before her and who followed after her, and whose heroism and devotion to duty were as great as hers.

Florence Nightingale did not found nursing, for nursing is one of the oldest occupations of women. What Florence Nightingale did was to make nursing a dignified secular profession and a branch of medicine. She instituted also the modern methods of training nurses.

The success of Florence Nightingale came as the culmination of a series of seemingly fortuitous events. Each, even to a war, was a necessary step in her career and was timed precisely to the moment of need. The first of these events—if it can be called such—was the condition of nursing in hospitals, particularly in the those of England, in the first half of the 19th century. This period was one in which all social relations were marked by extreme prudery—so much so, in fact, that this attitude had affected even the Sisters of Charity. A series of absurd restrictions were imposed upon the irreligious orders. They were forbidden to perform all sorts of necessary practical bits of nursing on the grounds of impropriety. Consequently, while they retained their serenity and gentleness, they had lost their practical usefulness. The Sister watched the sick, maintained discipline and system in the hospital, and shed an atmosphere

of refinement over the wards. All the actual care of the sick was performed by lay attendants.

In most English hospitals even this supervision by gentlewomen was lacking and the entire nursing was in the hands of lay attendants controlled by men. The consequence was that nursing in the hospital and in the home, as well, was relegated to the lowest type of vulgar, brutal, drunken women, of which Dickens has given us a picture in his description of Sairey Gamp.

A note in the *LONDON TIMES* for April 15, 1857, describes the servant nurses of the large hospitals in these words: "They were sworn at by surgeons, bullied by dressers, grumbled at and abused by patients, insulted, if old and ill-favored, talked flippantly to if middle-aged and good humored, and tempted and seduced if young and well looking."

In short they were the worst type of women conceivable for the work of nursing. The hospitals under their care were filthy and vermin ridden, and the wards were scenes of repulsive squalor. Nor did the physicians in charge pay much attention to any need for cleanliness. Here is an extract from the regulations of one of these hospitals; it is in reference to the linen of the patients. It says: "Their sheets shall be shifted once a fortnight; their nightcaps, drawers, and stockings once a week." The windows of the hospital were kept tightly closed against fresh air. The wards were inconceivably horrible.

A Determined Woman

Now turn from these events to those in the life of a well-born and educated English lady, young Miss Nightingale. She has been pictured as a saintly, self-sacrificing, delicate woman who threw aside a life of pleasure to help the afflicted. But this picture is not a true one. She was a strong-minded woman with a gift of caustic sarcasm. Her one great interest in life was to establish the independence of women. Women were allowed education and that phase was new, but they might not yet display their talents in any practical use. Following their education they sat about the house in genteel boredom, poured tea, and waited for the equal boredom of a Victorian marriage. Here are the words in which Miss Nightingale sums up the situation. She says:

“The want of necessary occupation among English girls must have struck everyone. . . . The intellectual development of English women has made extraordinary progress. But the human being does not move two feet at once, except he jumps; while the intellectual foot has made a step in advance, the practical foot has remained behind. Woman stands askew. Her education for action has not kept pace with her education for achievement.”

Her family suggested that if she were bored she might visit the sick in their homes and bring comfort to them. She replied that she did not know how to tend the sick and all she could do would be gossip with them, and she could as advantageously gossip with her friends. She then horrified her family by suggesting that she be allowed to go to a hospital and learn nursing. In view of the conditions in the hospitals her family's horror had some justification. They compromised on a trip to the Continent, and so with her sister and mother she went to a fashionable watering place. But she stole away from there and entered on a short course of training with the Sisters of St. Vincent de Paul at Paris.

Florence Nightingale's Alma Mater

Florence was now 29, and had passed into that stage of spinsterhood which was the despair of the Victorian family. Such a one would most likely go on caring for the china and decorously pouring tea the rest of her life. But she had other ideas. She journeyed to Kaiserwerth, a town near Dusseldorf, where a Lutheran pastor named Fliedner had started a training school for discharged female prisoners. In his efforts to find occupation for these women he had evolved the idea of training them to be nurses, and to this end he was operating a small hospital. Florence Nightingale joined his classes. Her experience there gave her the solution to her problem—a field of work for educated women. Her family now having given her up in despair, she became the superintendent of a nursing home in Harley Street, London. But other gentlewomen did not respond to her example; she made little progress in her endeavors to interest them in nursing.

We shall turn now to events occurring at this time in Russia and Turkey. Nicholas I of Russia had decided to renew the plans of Turkish conquest commenced by Catherine the Great. Assured of the neutrality of Austria and Prussia, he moved his troops into the principalities of the Danube.

In the same year that Florence Nightingale assumed the superintendency of the nursing home, the French and English fleets took up position at the entrance of the Dardanelles for observation. A year later these western powers had allied themselves with Turkey, declared war on Russia, and the Crimean war was under way. Our interest here does not take us to the battlefield of Alma nor with the historic charge of the Light Brigade at Balaklava. Instead we shall leave the allied armies besieging Sevastopol and return again to London.

An Exposure in the "Times"

News of the war came to the "TIMES" from Russell, the correspondent at the front. In September and October of 1854, before military officials at the front had suppressed him, he told some plain and unpleasant truths; he wrote among other things: "It is with feelings of surprise and anger that the public will learn that no sufficient preparations have been made for the wounded. . . . There are no dressers or nurses. The French medical arrangements are extremely good. . . . they have the help of the Sisters of Charity. We have nothing. The men must attend to each other or receive no relief at all. The sick appear to be attended by the sick; the dying by the dying."

In consequence of this exposure the English public was aroused to the highest indignation. A call was issued for volunteer nurses. Women responded, but they were untrained, they knew nothing of nursing. There was no corps of trained nurses in England to answer the call. But there was Florence Nightingale, who was ideally suited to fulfill the needs of the moment. Mr. Sidney Herbert of the War Office broke all red tape and wrote her, offering to give her, full charge of the situation.

One week later Florence Nightingale had collected thirty-eight nurses, ten of whom were nuns. She was then officially designated, "Superintendent of the Nursing Staff in the East." The thirty-eight nurses to take care of all the wounded from the entire British Army.

The little band landed at the hospital at Scutari, a suburb of Constantinople, on November 4, 1854. This hospital was a Turkish barrack intended to houses a thousand men; in it were crowded four thousand soldiers who were wounded or overcome with cholera. Four miles of beds and thirty-eight nurses. The wounded and the sick were brought in ships

across the Black Sea. They received virtually no medical attention before or during their voyage, and they spent two weeks on the way.

Army regulations required that these men bring clothing and equipment with them, but they had only the rags they wore. The regulations made no provisions for supplying them. Consequently they were tumbled into the hospital to lie where they fell and to die there.

There was no furniture in the hospital except beds supported on trestles. The windows were closed. An open sewer ran under the floor, and the floor itself was too rotten to scrub. The sheets were pieces of canvas. There were no towels, or basins, no knives or forks, no medicines—and no place to serve as a laundry.

In the yard of that hospital there were piles of unopened boxes containing supplies, the very necessaries from the want of which the men were suffering and dying. But army regulations forbade the opening of these boxes until the orders to do so had arrived from proper authorities.

An Example of Devotion

But Florence Nightingale was not the woman to wait upon military red tape while her patients suffered; she opened the boxes, she cleaned and aired the hospital; she built a laundry. She even built a new hospital.

No frail and timid woman achieves such aggressive triumphs as these. Florence Nightingale was an angel of mercy to the wounded soldiers. They kissed her shadow as it crossed their beds. At night, as lamp in hand she went through the wards, a whispered blessing sounded after her. But she was no angel of mercy in the eyes of the local military authorities; she was a raging, tormenting demon. They cursed her very presence. In the interest of her patients she bullied the colonel; she cut short the cherished red tape of the army. She appealed over the heads of local authorities to the War Office at London. Each time she wrote, her appeal was granted and her authority was strengthened. When money was lacking for supplies and proper food, for sheets and lemons, shirts and tea, she wrote to London concerning her needs and money flowed out to her from popular subscription. She triumphed over petty official oppression; no effort or personal sacrifice was too great to make in the interest of nursing. Her work, as she defined it, was "to

help the patient to live," and every means to that end she justified.

In 1856 the war ended. The troops were demobilized. Four months later when the last of the barrack hospitals had been closed, Florence Nightingale returned to England.

No effort of hers was needed now to establish trained nursing; it was inevitable. She had done her work. Thousands upon thousands of advocates of nursing preceded her to England. Nowhere could more appealing champions have been found, for they were the wounded heroes of the war. Sisters, mothers, daughters and wives heard of the work of the "lady with lamp"; to her nursing they owed the lives of their brothers, fathers sons, and husbands. Funds were raised and training schools for nurses established, and soon the new style nurses were in the wards of the hospitals. A new era in the care of the sick had commenced. But Florence Nightingale, in giving the example of devotion that brought this era into being, had also given her health. Thereafter and until her death in 1910 she was an invalid.

May 12th, National Hospital Day

In tribute to the memory of Florence Nightingale, May 12th, the anniversary, is designated as "National Hospital Day." That day the doors of the hospitals are open and you are welcome there as visitors. These hospitals that you will visit are themselves monuments to the memory of Florence Nightingale, the woman whose name has become a symbol—a symbol that is everlasting, for the lamp she carried through the words of Scutari still shines brightly in the hands of each generation of trained nurses. It is an everburning emblem of their devotion, selfsacrifice, and mercy.

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THE PROGRESS OF DENTISTRY

There was once a time, about four hundred years ago, when, if you needed your hair cut and your face shaved, you enquired the way to the nearest surgeon. When you got there you found over the door of his shop a wooden pole painted with red and white spiral stripes like a stick of candy. In the window there was a wide dish of polished brass with a semicircular space cut from one side of its rim. You entered and made your wants known. The surgeon motioned you into a chair and handed you the brass dish. You put it under your chin, with the semicircular opening fitting against your neck. After these preliminaries the surgeon cut your face, using the dish as a mug in which to mix the lather and as a basin to catch the drippings—in those days the town barber and the leading surgeon of the community were one and the same person.

Let us see now what the dentist was like. Perhaps you had a toothache and wished to consult one—in those days you would have consulted one for no other reason. You have a wide choice to select from. Provided your taste and purse inclined that way, you could apply to the state executioner who conducted dentistry as a side-line. If not engaged in his major occupation he would gladly lay aside his rope and axe and gouge out the aching molar for you, with only a small fee in recompense for his services. The keeper of the public bath-house was also an amateur in extraction. But for really expert treatment you would have applied to the mountebank who had his booth on a raised platform at the street corner.

Street Corner Dentistry.

Stop and watch this vagabond dentist for a moment. He is a shifty-eyed dirty rogue. The lead Plaque on the brim of his cavalier's hat is stamped with the image of the patron saint of tooth pullers. His patched leather jacket is strung over with teeth, mementos of his professional activities. With one hand he steadies the head of a terror-stricken youth and with the other he makes wide gestures to the crowd below

him. He tells them that his name is 'Kindheart,' and that he is the world's most renowned extractor of teeth—quick, painless, and never failing. On the faces below him there are two expressions: One of merriment, worn by those who are here merely to enjoy the exhibition; the other, one of serious doubt, worn by those whose aching teeth make them possible victims. Without interrupting his patter, the mountebank reaches for his extracting instrument, and fumbles with it in the mouth of the youth; there is a sharp yelp of pain and the tooth is displayed to the crowd. The spectators thin out perceptibly. Your own toothache is diminished noticeably. Perhaps it would be better to return to the barber-nurse and let him attempt the extraction even though his hand is less experienced.

In his shop you are told to lie on the floor; and as you stretch out on the boards, he kneels, holding your head between his legs. The instrument that he uses is a pelican, a sort of forceps with ratchet teeth on its blades suggestive of the pipewrench that is now used by plumbers. The pelican when applied to the tooth has a relentless grip; brute strength completes the extraction.

This barber-surgeon of four hundred years ago will, if you request it, do more than merely relieve the pain of toothache by extraction; he will repair the blemish to your appearance by filling in the gap in your teeth. He can whittle out an ivory peg and tie it in place with gold wire.

If you can afford it he will transplant a tooth. But, for that operation you must first purchase a sound tooth from some one else. Your most likely prospect is a young girl or boy whose needy parents will sell their children's teeth.

The sound tooth is extracted, its roots forced into your jaw, and its crown tied in place with thread. In a week or two the bone will grow firmly to the transplanted tooth. You now have the satisfaction of knowing that this new tooth of yours will never ache because its nerves have been severed. Of course it is infected and in time an abscess will form in the jaw-bone about it but no one in that time knew anything about infection from teeth or its effect upon health.

Early Preventive Dentistry.

It you ask this dentist what causes decay he will probably tell you that it results from worms that eat away the substance

of the tooth just as they eat away the flesh of an apple. If you ask him how to prevent toothache he may hand on to you the ancient treatment recorded by Pliny, which was to eat a whole mouse twice a month.

The dentistry of four hundred years ago that I have pictured was, with minor variations, the dentistry of all previous ages; the principles upon which its practices were based were carried down unchanged nearly to the present century. The only considerations involved in this dentistry were the prevention of pain and the preservation of beauty; consequently, dentistry existed as a trade allied to those of the gold smith and the beauty specialist. It is only in modern times that we have come to realize that the primary consideration in dentistry should be the prevention of disease and the preservation of health. The dentist of today has become the practitioner of a great and important specialty of medicine. And it is only fair to add that the surgeon has given up his barber's duties.

In following the progress of dentistry I am going to tell you next of a dentist of two hundred years ago. We shall visit a Frenchman by the name of Pierre Fauchard. Dentistry is not yet a profession but has been taken from the hands of the vagabond and the mountebank. It is practised as a recognized and respectable trade. The objects of dentistry have not changed, however, they are still merely the prevention of pain and the preservation of beauty. We shall stand for a time in Fauchard's room and watch him treat his patient. The first one to enter is a young lady, the daughter of Monsieur Tribout, organ builder to His Majesty, Louis XV. She is suffering agonizing pain from a decayed tooth in her upper jaw. But she cannot make up her mind to have it out because of the disfigurement that will result. She appeals to Fauchard and he suggests a happy solution to her difficulty. Carefully and skillfully he extracts the tooth. Then he puts it back, driving its roots into their former socket. He ties the tooth in place with thread, fills its gaping cavity with lead.

Fauchard Aids a Lady in Distress.

The extraction has broken the nerves that supply the tooth and, so the pain will stop. The jaw-bone will grow about the tooth and hold it in place; the lady's beauty will

be saved. But Mademoiselle Tribout will have her troubles later. The operation that Fauchard has carried out for her is essentially the same as pulling an infected splinter out of the flesh and then inserting it again. The lady will soon have an abscess in her jaw-bone; perhaps rheumatism will follow, and her stiffened fingers will lose their skill on the keys of the organs that her father builds. But in the meantime she retains her beauty; at least, until she has married. Only a few years before, Fauchard straightened the crooked teeth of one of her friends, Mademoiselle Gasset, and her parents made an excellent match for her—she is now rich and unhappy.

When Fauchard filled the cavity in the tooth he had no dental engine with which to drill; he used a file instead. John Greenwood, dentist to George Washington, is said to have devised one in connection with a spinning-wheel, but it was not until 1870 that a practical form of the dental engine came into use.

Fauchard's next patient is an aged courtier whose only remaining teeth are those in the front of his jaws; for many years he has not opened his mouth to smile. Even these teeth Fauchard finds have become so loose that they must be pulled. The courtier will go into seclusion while Fauchard makes false teeth for him. These he carves from ivory and fastens the pair together with springs. They resemble the famous set that George Washington used and which were repaired for him by Paul Revere, for he was not only a silversmith and patriot but also a dentist. Fauchard will, if you wish, insert a pivot tooth; to do so he suspends the carved ivory crown on a wooden peg driven into the old fang. These ivory teeth were horribly insanitary, for they absorbed fluids from the mouth and could not be kept clean; they also decayed. It was not until the 19th century that really satisfactory porcelain teeth were successfully manufactured.

The First Dental Journal.

For our next scene we shall go forward a hundred years from Fauchard's time. There are still no schools of dentistry; the students learned their trade by apprenticeship to older dentists. But the dignity of the trade has increased greatly and there is active cooperation between its members. To serve their common interests they have founded a journal of

dentistry. Its first volume was published in 1839, in New York City; it was called the *America Journal of Dental Science*. In glancing through the pages of that first volume the item that catches the attention particularly is a poem in five canto called "Dentologia, or a poem on the disease of the teeth," by Solomon Brown, A.M., "with notes, practical, historical, illustrative and explanatory," by Eleazar Parmly, dentist. This poem has an important place in dental history for it marks the first serious attempt to popularize dentistry by pointing out the importance of conserving the teeth. This education of the public by the dentists has continued from that day onward; it is an important aspect of the services which they have rendered.

When this poem was written only a few people went to the dentist, and mostly they were driven there by pain. The poem, "Dentologia," was intended to emphasize the importance of dental care, but as you will see the appeal was not to protect health but to prevent pain and to preserve personal beauty. The style of writing was that which was popular at the time. Here are few lines from the second canto:

"Robbed by neglect, of symmetry and grace:
Behold those organs formed on nature's plan,
To serve important purposes to man;
To form the sounds in which his thoughts are drest,
His wishes uttered, and his love confest;
To fit his solid food of every name,
For healthy action on the general frame;
Behold these organs, wrested by abuse,
From wisest purpose, and from noblest use,
Deranged, displaced, distorted, set awry,
Disgusting objects of deformity!

But learn the remedy—the dentist's skill subjects disordered nature to his will."

In a later canto the author devotes four stanzas to describing the alluring beauty of a lady named Urilla, "nature's favored child"; and then Urilla opens her mouth to speak:

"And lo, the heavenly spell forever broke;
The fancied angel vanished into air,
And left unfortunate Urilla there:
For when her parted lips disclosed to view,
Those ruined arches, veild ebon hue,
Where love had sought to feast the ravished sight
On orient gems reflecting snowy light,

Hope, disappointed, silently retired,
Disgust triumphant came, and love expired!"

Soon after 1839, schools of dentistry were opened and the technical aspects of the profession progressed amazingly. In the decade following 1880 mechanical dentistry reached its culmination in the vogue for ingenious and expensive crown and bridge work. But throughout this stage of development the primary object of dentistry had remained the same—the prevention of pain and the preservation of beauty.

The Rise of Modern Dentistry.

Then, within the space of only a few years, there came a change, the beginning of a revolution in dentistry as profound as that produced in surgery by the work of Lister. Lister showed that infection in surgical wounds is caused by bacteria. His work laid the foundation for modern surgery and raised the profession to the position of dignity that it holds today. Dentistry likewise had its Lister. Professor Miller, an American dentist teaching in Berlin, made the discovery that decay of the teeth was due to the action of bacteria. He showed further that if this decay of the teeth is unchecked it may, and often does, lead to serious disease of the body. His work demonstrated clearly that the primary purpose of dentistry is to prevent disease and to preserve health. As a result dentistry has ceased to be merely a trade; it has become a profession. Today it is one of the most important parts of medical science. Its contributions to personal health probably rank higher than those of any other branch of medicine.

The discovery of x-rays in 1895 gave a great impetus to the spread of the knowledge of tooth infection. By means of the x-ray the abscesses at the roots of the teeth and in the jaw-bone can actually be seen. The infected teeth can then be extracted and the dangers of general infection of the body, and consequent ill health, prevented. Purpose of dentistry, however, has extended far beyond this treatment of infection; it aims now to prevent infection.

Modern knowledge has demonstrated the steps by which the infection progresses. Each tooth has a layer of protecting enamel on its surface. Beneath the enamel, and forming most of the bulk of the tooth, is a hard substance called dentine. In the center of each tooth is a filled with delicate tissue containing blood-vessels and nerves which

extend from the jaw-bone and enter the tooth through openings in its roots. This sensitive tissue in the center of the tooth is called pulp, through minute canals it extends out into the dentine. Decay of the tooth starts with a break in the enamel. The bacteria get into the dentine through this opening; they gradually destroy it, forming a cavity. The tooth is a living structure and this cavity in the dentine is an open and infected wound. Teeth do not repair their wounds.

The infection of the dentine is not serious until it has extended to the pulp in the center of the tooth. Prior to that stage it can be stopped and remedied by dental treatment and filling. If, however, the decay is allowed to extend to the pulp, and it will do so unless it is quickly arrested, the situation becomes serious. Nerves and blood-vessels are exposed; the tooth aches. Further extraction and subsequent bridge work are necessary, or else elaborate and expensive dental treatment is required to prevent the infection from reaching the jaw-bone.

Dentistry a Prime Necessity of Health.

Decay of the teeth cannot today be entirely prevented, even with the best care. Consequently, dentistry aims to arrest this decay at the surface and to prevent it from extending to the pulp of the tooth. Frequent examinations of the teeth are necessary to detect decay in its early stages. As a result the members of the dental profession have, in the interest of their patients, made every attempt to inform the public of the necessity of regular inspection of the teeth. But unfortunately, it is a proven fact that even the most skilful dentists are often unable to detect small cavities hidden away on these surfaces of the teeth which touch each other—the so-called interproximal surfaces. In spite of frequent examinations, decay in these localities may sometimes progress to an extent that necessitates expensive treatment.

Recently, however, the dentists have shown that these cavities can be detected even in the earliest stage by x-ray examination. The procedure, x-raying the teeth and their roots, which was designed primarily to detect abscesses is not necessary in locating these interproximal cavities. It is sufficient merely to x-ray the crowns of the teeth which, with modern methods, using the so-called Bite films, can be done with great facility and at little expense. The yearly x-ray examination of the teeth is now rapidly becoming an indispen-

sible part of dental service. And what to many people will seem the most radical aspect of this use of the x-ray is the fact that it is diminishing the cost of dental care: it does away with the expensive treatments previously needed when interproximal cavities were detected only after they had become very large. The great importance of this economy lies in the fact that every one can now afford modern preventistry. Nobody can afford to do without it. It has become one of the prime necessities of life—food, clothing, shelter and dental care.

THE APPRAISAL COMMISSION'S REPORT.

EXTRACTS FROM A LETTER FROM DR. L. H. HAVERMALE.

Chicago, Illinois.
5802 Maryland Ave.
February 20th, 1933.

I'm glad that you are having so much success in carrying on your plans for religious education in the Chengtu District. I have used our W.C.U.U. doctors as cases in point whenever I have had occasion to speak on the "Layman's Appraisal of Missions". I have had such opportunity both in union meetings and in institutes. I hope that you folks are not anxious about its effect upon the home constituency in their attitudes toward the missionary enterprise. We have had an exceptional opportunity during these months of following up its influence in America, and while it may ultimately cause a realignment of missions sympathizers, it seems to me that on the whole the results are beneficial. Certainly the interest in the work and returning confidence in the legitimacy of the enterprise are increasingly evident among the younger people and constructive educationalists.

You will find all types of opinions expressed, the most critical being based, it seems to me, upon misunderstandings of the content and intent of the Appraisal. Of course, Pearl

Buck's praise was rather extravagant,—"I think this is the only book I have ever read which seems to me literally true in its every observation and right in its every conclusion." But Stanley High's was almost as extreme,—Here "is material sufficient for the revolutionizing of the entire missionary enterprise, and sufficient also, I believe, for its resurrection." At the other extreme there are those who still feel that preaching of certain theological doctrines on the basis of the Great Commission is the only legitimate *raison d'être* for Missions and these, like Dr. Samuel G. Craig of the Presbyterians, claim that this appraisal is "hostile to evangelical Christianity", or like Dr. Samuel Zwemer and Robert E. Speer, find in it "grave omissions" in lack of reference to the Bible and the work of the Holy Spirit, in its findings, and too many "serious implications" in the insistence that professional standards be matters of first importance whenever the Mission undertakes medical and educational work rather than making the doctor an evangelist first and a physician when he has time.

There are others who, like Dr. James Endicott, criticise it because they feel that the Christo-centric emphasis of the Jerusalem Council is being abandoned for a religious syncretism, and the Baptists as well as Dr. Zwemer, and our Jewish protagonist, George E. Sokolsky of Shanghai, and in fact all our Board pronouncements of every denomination, feel that this appraisal "does our missionaries less than justice."

But of course you have the original report in your hands by this time and can judge it for yourselves, and you also have the *Christian Century* and have been reading the personal reactions published therein. So all this is "carrying salt to Tzeliutsing" so far as you're concerned. Speaking for myself, I have followed the Congregational and the Methodist policies and have spoken in its support.

We had the opportunity of hearing Professor Hocking in three lectures at the University of Chicago, and of course Dr. Woodward, the vice-chairman, is a member of our own faculty, and has spoken on the subject before our Furlough Club, as Dr. Holt, also a member, has done. And then we were guests when the entire Commission, with two exceptions, put on a two day forum at the Hotel LaSalle here in Chicago.

In all of these cases the attack seems to be concentrated on the "theology" of the first four chapters. This, by the way, is also Canon Raven's point of attack. Of course the Commission was composed of all these diverse types of theo-

logical belief, and had to do that impossible thing, distil Christianity for the "essence" of a Christo-centric gospel. (I have been working on that same problem in one course on "The Christian Message" this quarter, taking outstanding authors as representative, and believe me, the effort to find *one* interpretation or *one* "essential doctrine" on which all of us "Christians" can agree without mental reservations is apparently hopeless.) What is so sinful about the proposition that "we agree to differ, but resolve to love" or that each one of us should let his interpretation grow out of the satisfaction of his own fundamental needs as subjected to reverent scrutiny and evaluated by ethical and social criteria?

Well, Dr. Hocking's final draft of the first three chapters of the Report tried so hard to satisfy all members of the Commission, that the result is similar to that of the Jerusalem Conference report on the same question when critically examined,—it's neither fish nor fowl, but a sort of hash. Prof. Baker, who was a member of the committee of the Hyde Park Baptist Church which was appointed to present the "liberal" section's report approving the Appraisal as opposed to their "conservative" section of the church at large, tells me that even the liberal write-up was referred back to them 12 times for revision!

Dr. Spicer suggests that the first part on the new philosophy and technique of missions, and the last part on reorganization and unity among the Boards at the home base, be eliminated, and that the central section dealing with specific suggestions for improvements in individual projects in evangelistic, educational and medical endeavors be accepted. In other words, whitewash the surface but make no fundamental changes looking toward a deepening of Christian fellowship and co-operation! Or, throw back the responsibility on the missionary who is being criticised because he obeys the home-side pressure for theological emphasis, denominational advancement, and concrete results quantitatively measured, but don't attempt fundamental reforms at home or cooperate for the realization of the unity for which Christ prayed.

Of course the Report reflects the educationalists' and psychologist's point of view clear through, and for that reason, it would seem, is incomprehensible to the ecclesiastical, evangelistic type of mind. Far be it from me to rush in where angels fear to tread in such a question as this, but I have very definite judgements on this point. For instance,

Dr. Endicott's criticism as to "syncretism" though founded on fact, simply ignores the truth that in cultural transfusion the way to synthesis or assimilation is by way of syncretism. No one wants to stop before the process is completed, least of all the Laymen's Commission. Syncretism is not enough. But in introducing Christianity with the hope that it will eventually become indigenous or assimilated, how can one arrive without having gone through (1) the steps of pattern ideas set down in the dominant culture, (2) gradual comparison and adoption of desirable features of the new, (3) a critical evaluation of the values inherent in the new and an attempt to combine them with the old, and (4) finally an assimilation of the new to such an extent that all are integrated into one system of vital culture, a real living organism? And yet this is the old, familiar course of juxtaposition, eclecticism, syncretism, and assimilation. It is the same process by which we arrived at our first and fourth gospels, our Pauline theology, and our Protestantism of today. And even yet we have not arrived at a real assimilation of Christ's truth, as witness our disunity, or war-ridden world, our racial antagonism, and all the rest!

And I feel just as strongly in regard to the home opposition to the Reports suggestion that for years to come it will be necessary for us as Christian bodies to work alongside of other religions in a state of friendliness and co-operation against secularism, "searching for final truth together." What is pedagogically more true than that truth (even admitting that *we* have arrived at a perfect comprehension of truth) must be personally appropriated, and that the religious experience—of all things—cannot be transmitted by another? With 160 Protestant denominations, not to speak of Roman and Greek Catholics, all claiming to have essential truth as represented by dogma, church organization, sacraments, and a divinely ordained ministry which must be maintained unaltered in one or more of these phases, what else *can* we do as Christians in this confusion, but to seek the final truth together? And when we are examined by Confucianism, Buddhism, and Mohammedanism who have their own sectarian troubles these days, and represent conflicting world views, while the scientific method and secularism challenge any and all religious viewpoints, what *can* we do but profess a willingness to submit our own convictions to the same scrutiny with which we examine others, and "search for final truth", a truth accepted as having supreme value for all of

us? Every enlightened parent, every trained school-teacher knows that the wise method is not to begin with the printed answer to the problem, or with the "don'ts", but with the problem itself, with a sharing in an experiment, and a making available of all the resources which have pertinence to the problem; the parent and the school-teacher along with the child or pupil will arrive at the answer *together*, and *then* only, after having thought through and independently applied the principle, can the learner be said to have arrived at Truth, or an idea validated by experience.

I agree with the Presbyterian's official action in which they state, "We believe that the Gospel is to be proclaimed and Jesus Christ to be made known, not by word *or* deed, but by word *and* deed and that this union is to be effected not by having some missionaries who only preach and other missionaries who only heal or teach, but by having all missionaries communicate the Gospel by both deed and word." But I deplore the fact that this is set up as a contrast with the Laymen's Report which recommended that schools and hospitals be considered as a form of Christian expression, an end in itself, rather than as making the evangelistic method paramount, and putting professional standards secondary. I had supposed that Fleming's book on "Ways of Sharing with Other Faiths" with its formulation of the ethics of the missionary would have drawn more fire from such critics than has this little paragraph in the Laymen's Report, for they mean the same thing. But for some reason or another, Fleming was overlooked.

In my talks I have called attention to the wonderful opportunities which the top-notch professional men of our University have had along religious lines or the lines of personal influence. I have shown how such influence wanes when evangelistic endeavor takes the place of professional ability. I have told of Dr. Peterson's work and reputation in West China and how they enhanced the meaning of Christianity; of Dr. Kilborn's high standing and of his Deanship, and of the request of student groups that he act as chairman of voluntary discussion groups three nights out of the week and other groups on Sunday; of your own contribution not only in medicine but in choral work and in religious educational work throughout the conference. And I have used effectively the work of Dr. Stubbs, Dean of Science, and his similar popularity along religious lines culminating in his "victory". And I have taken as contrast, though not without a natural

reluctance and humiliation, my own experience as a missionary whose work was by force of circumstances considered as "evangelistic" in the *paramount* sense, yet put very definitely on the "side-lines" when it came to student choice for help and advice in creative religious or Christian work.

There are points, of course, where I am not wholly in accord with them in this Appraisal. I do not think that they would find the success which they assume were they to attempt to function "to formulate general policies for their representatives on mission fields, appoint executive officers, field directors, etc." This would be a backward step, since it would be losing all the fruits of devotion and would take the creative powers away from the national Christians. I am quite sure that the attempt to superimpose western surveys, research techniques, and experimental projects along western lines would meet with very difficult obstacles if undertaken by those unacquainted with Chinese points of view, or those who had not won their confidence through years of close, disinterested association. I am persuaded that to withdraw or to replace the consecrated but inadequately educated type of missionary in rural communities, by an agriculturalist or other type of specialist, while beneficial in a particular way, would be a mistake. Changes in "culture" even if it be "agri-culture" are not effected in the Orient on the basis of western efficiency, and I doubt if such as these would really stand the gaff in "lonely stations" if they could not build upon the friendship and confidence inspired by these "evangelistic missionaries."

The financial fruits of the Appraisal cannot be shown until some constructive measures have developed. The smoke and the dust of criticism will have to die down first. The Congregationalists have already prepared a manual for the study of the larger volume, interpreting it by the light of their own Mission policy and achievements. The Methodists have such a manual in process of preparation. The Christian Associations I believe, are getting out a \$0.50 paper bound edition of the original. The International Council of Religious Education voted to make the emphasis for Young People's study this year, "The World Task of Missions" or words to that effect. Bishop Lee told me that while one donor had written him that in view of the Methodist pronouncement, — namely, that "We believe that the Appraisal report and the ensuing discussions will mark a new epoch in missions, an epoch to be characterized by new tides of spiritual life in the

church, and by the giving of life and substance in larger and more sacrificial measure” and also “the search for reality and the courageous facing of the issues so characteristic of this Inquiry are in full accord with the temper of youth today and will give new meaning and effect to the Christian message as it is presented to this disturbed and distracted modern world,”—in view of this pronouncement and the lack of a dissenting voice, he was withdrawing his usual gift of \$4000 annually to the work in the Philippines. Yet within the same week, an Illinois Senator who has usually confined his contributions to a Methodist college in Illinois, on his own initiative made a contribution to cover this loss, though he had never given to Missions before; and the Layman’s Committee which sponsored the Chicago counterpart of the first Layman’s Appraisal Meeting and Forum in New York, was composed in part of men of high standing who hitherto have felt no interest in the missionary enterprise as outlined and conducted on a denominational, competitive basis. So there we are! Only time and study and new planning can show us the net result of the “first Laymen’s investigation of missions in a hundred years.”

LEWIS H. HAVERMALE.

Next month we hope to publish the views of Dr. Cyril Canwright.—Ed.

NOTICE

I have been asked to get out the List of Missionaries, published annually in the News by the Advisory Board.

Will Mission Secretaries please see that corrected lists are sent me promptly. Individuals who may have detected errors in former lists will please advise me of same.

Thanks for cooperation.

H. J. OPENSHAW

HEALTH AND EDUCATION

The world is changing; it always has been changing. But most of the changes escape our attention. We fail to see them because we are adaptable. If the change about us is gradual, we adapt ourselves to the altered surroundings without perceiving the alteration unless we are especially watching for it. It is only when the change is abrupt, beyond our limits of immediate adjustment, that it strikes our attention forcibly.

A year or so ago a piece of ledge broke off of the cliff over which the Niagara River falls; enormous attention was attracted. But the effects of that landslide were insignificant in comparison to those resulting from the slow progress of erosion which goes on day in and day out, which in the course of centuries has moved the falls over a distance of miles, and some day will obliterate them.

Similarly, the slow process of social evolution goes on about us, unperceived except by those who are particularly interested, who watch it and study it. Yet this gradual movement, in the course of years, brings about changes more profound than the upheavals resulting from fiercely fought wars.

Everything about us, even the most commonplace, is changing before our very eyes. Nothing is stationary. But generally it is only by looking back to the past, by reviewing long spans of time, that the movement, sometimes forward, sometimes backward, strikes vividly upon perception.

Are you curious about the romantic past of today's commonplace? If you are, what thoughts are conjured into your mind by the public school? That institution is certainly a commonplace one to all of us. But what a tempestuous past lies behind it, and even now when it seems a stable institution, it changes year by year. Are you conscious of its changes? Do you take part in its developments leading toward better schools? Or has its change been imperceptible to you? What thoughts are brought to your mind by the statement that tomorrow is the opening day of this year's National Education Week and Tuesday is set aside for the topic of "Child Health"?

National Education Week.

As you know, National Education Week is the time especially devoted to bringing parents into closer contact with the school system. The doors of the school will be thrown back even wider this week, and to each mother and father there is an urgent invitation to visit the school in an effort to further the cooperation between parent and teacher, between family and school.

Cooperation between the American home and American school is what is asked, so that the two may work together for the greatest benefit to the rising generation. It is your privilege to help this generation advance beyond us, under the combined influence of a better school life; building for it a greater nation and happier civilization than we have produced. That idea sounds familiar enough to our ears, but in reality, viewed in the light of history, it is revolutionary.

The past has seen the school predominant and the family despised; it has seen the family reign supreme and the school ignored. It has seen education disappear from the land except for privileged few, and again education offered grudgingly insultingly, as a pauper's dole. And finally, it has seen the rise of the idea of the modern public school, free and equally open to all, a tax-supported, non-sectarian institution supplementing family, cooperating with the home to give most effectively to our children the preparation for a full, noble, and healthy life.

Like so many of the ideals of modern civilization, those of the school have their roots in the principles laid down in the great civilizations of ancient Greece and Rome. What sort of cooperation between the home and the school was there in those times?

The ancient Greeks gave us the creed that good citizenship was the first ideal to be sought in education. Our schools make citizens. But Plato, when he drew up his theory for the Ideal Republic, wanted to exclude the home because its influence distracted from interest in the state; and the great philosopher Aristotle thought that the family exercised more evil than good upon the child. In Sparta, the ideal was nearly realized in practice. The Spartan boys and girls were taken from their families at a young age and put in training barracks; the boys were educated to be warriors to defend the state and the girls trained as mothers of future warriors. The state took complete charge, complete re-

sponsibility. There was no cooperation from the home: neither home life nor home influence was wanted.

Roman Ideas in Education.

In Rome, on the other hand, there was a complete antithesis in educational ideals. A responsibility was thrown upon the parent that no one would want to accept today; it was a vastly greater burden than that which our schools put upon the family in asking mere cooperation and help. In Rome, before the spread of Grecian influence, there were no schools. Family life and home training were paramount.

The father literally held the child's life in his hands, he was within his rights, if he chose, to kill his young son or daughter or confiscate the property that his married son had accumulated. With perfect propriety, a citizen could "expose" his infant child, and many did so. That is, the newly arrived baby was looked over and talked over and a momentous decision made whether the family should keep it or dispose of it. The choice was a free one, but not one to be made lightly. If the child was retained, its acceptance into the family entailed the deepest obligations on the part of the parent. But perhaps there were already too many girls in the family; perhaps a boy was not desired. If so, the father took the little mite, put it gently on the temple steps, and left it there. Anyone could adopt it, anyone could take the child so "exposed" and train it as slave or a courtesan, or if no one did, it was left to die there.

In Roman homes there was always a child health day—different from our own—when the new baby came. If it seemed sickly or was deformed, it was "exposed" for that reason.

Times have changed very strikingly between the old Roman days and our own; ideals have changed. But don't think of these Roman parents as cruel and barbarous; perhaps they seem so from our standards, but they, in turn, would have looked upon us in contempt and horror as a people who shirked a responsibility to children. They exercised the right of refusing or accepting the child into the family, but if it was accepted, there was entailed upon the parent an enormous obligation—complete education of the child and complete responsibility for its behavior throughout life. An ill-educated man or woman, one with bad manners or poor citizenship, was a disgrace to the parents for which they could be publicly censured.

Ancient Parental Responsibilities.

The child was compelled to pattern its life after that of the father or the mother; the parents had to model their conduct on the perfection that they wanted the child to attain. The system had some advantages that might be copied with benefit today.

Its perfection we can admire even while we condemn its cruel aspects. But in that regard do not be too hasty; our vaunted ideals of humanity are not so ancient in their practice that we can afford to be altogether smug in the matter.

Humane ideals are one thing, and humane ideals attained are another. Good intentions poorly executed are little better than intentional cruelty. We could find some damning evidence against our own civilization if we went into the matter thoroughly. The conception of foundling homes dedicated to the care of "exposed" or orphan children is a noble one, but the history of these institutions is not pretty; the combination of good intentions and good practice in this respect is a modern achievement.

Disregarding what seems a cruelty in the Roman father, and looking rather at the Roman conception of responsibility of parent to child, let us examine our own conscience a bit about the responsibility we accept and subsequently shirk or put upon the schools entirely. As I said, the schools open their doors wide to us next week, National Education Week. They ask us to inspect them and to see if school life supplements home life in the way we wish.

Inevitable Social Change.

Our modern schools are changing: change is inevitable. It would appear that there are three directions in which they can move. And in any one, their progress involves fundamental social changes. They can move towards the Spartan system, full state responsibility for the child, with corresponding decay of the American home and severance of the bond between child and parent or they can move in the direction of the ancient Roman system, a complete responsibility on the parents, a stronger home life. The only other road is the middle one of compromise, home and school cooperating, the school supplementing the home in doing for the child what the home cannot do or cannot as well.

In recent years the trend, it would appear, has been towards the Spartan system. The schools have taken over more and more the responsibility that formerly was left entirely with the family. The American public has apparently subscribed willingly to the diminished burden of child responsibility, and it would appear that the American home is today a far less strong institution than it was a few decades ago; The American family far less closely knit together than formerly. Perhaps our movement eventually will extend to the collapse of the home of the kind we know now. There have been profounder changes in society than that, and when the progress towards them was gradual enough, no great shock was felt. But our progress as yet is far from the attainment of such a goal, one which seems so undesirable to us. We have reached the stage merely at which we have the opportunity for a compromise, the compromise in which home and school cooperate to share a rightly divided responsibility.

The future of our social system lies in our own hands. We can ignore the gradual but inevitable movement, let it follow along the lines of least resistance, let chance and expedience guide it. Or we can take the matter into our own control and exercise the guiding force, there is offered the opportunity to seize upon what would appear to be the ideal system of education, home and school working together, But the parent must act if he wishes to attain this end; if he stands by indifferently, the opportunity to exercise a guiding force will slip from his grasp.

Now there are very excellent reasons why the state should take over certain responsibilities for the child. The problem, I think, is mainly which responsibilities it shall assume. The solution of that requires the greatest parental cooperation. There are two social ideals to which we have given our approval by writing them into our laws. The first is that every child must receive the moral and intellectual training which we call education. Towards this end the state has done more than frame an ideal, express a good intention; it has supplied the practical measures designed to achieve it. It has built and supported schools where all children can be educated, free. These practical measures, accepted as the commonplace today, were brought into effect less than a hundred years ago and against the bitterest opposition and deepest prejudice.

Health and Education the Right of Every Child.

The second social ideal is based upon the development of a humanitarian principle that a child, once given life, has

the right to pursue its life. The law so framed says that the parent shall not have right to dispose of weaklings in the ancient pagan fashion, that the parents must accept into the family any and every child that is born to them; with severest penalties the law has taken away free choice in the matter. but what practical provisions comparable to education has the state made to guarantee to every child the full measure of medical inspection and care which will insure the greatest possibility of a healthy life? It has not assumed this responsibility. Yet no one, I think, will question the statement that health is as important as education. And health is not a matter of chance.

We have accepted the principle that education is an inalienable right of every child. Why have we been advanced in accepting the corresponding principle that every opportunity for health is likewise a right of every child born into a state that entertains the good intention that every child must be allowed to live. Does not the duty fall upon the state to provide the practical measures that will insure the child's freedom from handicap by correctable deformities or by preventable, arrestable, or curable disease? Why should we make a distinction between matters pertaining to intellectual and moral attainments, on the one hand, and physical attainments and health on the other? Health should be as much a privilege of every child as literacy.

Perhaps you raise the objection that the responsibility for the child's health belongs in the home. If so, why do you stop there? Why not put the responsibility for the child's education likewise on the home? The obvious answer is that the school can educate it more efficiently than the home. If education were left to the parents, some accept the responsibility; others would shirk it. Some children would be well educated; others would be illiterate. Exactly! That is nearly the situation today in regard to the child's health. Some families do their duty well; some ignore it. Some children are strong and healthy; others are handicapped and diseased from want of medical care for child health more thoroughly, more efficiently than can the scattered homes.

I believe it is as clearly a duty of the state to offer as freely as education, individual medical attention for the school child. you perhaps say that the school already has taken over some of the health supervision. Yes, the trend is just beginning in that direction. At present, health supervision is carried out mainly to compensate for gross neglect of parents.

It is not undertaken in the sense of a definite responsibility, an obligation fully shouldered by the state.

The scope of medical aid can no more be detailed in this brief talk than can the full curriculum of studies, but let me cite one specific measure chosen at random to illustrate the kind of procedure I have in mind. I believe that the school should assume all responsibility for the welfare of the tubercular child. Such a child should be assiduously sought out from among the pupils, provided for and made into a strong and healthy man or woman instead of being allowed to go on to possible death or chronic invalidism under parental neglect.

Personal Preventive Medicine Schools.

You may have noticed the quiet changes that in some quarters are already moving in that direction. In several of my talk I have mentioned the tuberculin test, which some of our more advanced schools are offering to pupils, subject to parental consent. This simple, harmless, and inexpensive test shows whether or not tubercular infection has occurred. Where school examinations have been carried out, some twenty percent of the children are found to be infected. But the fact of mere infection does not mean that they have active consumption. That is determined by taking x-ray pictures of their chests. Some few are found to have the active disease. But since their disease is detected in its earliest stages, their lives and their health can be saved. What is more the detection of these active cases of tuberculosis allows the removal of dangerous sources of infection from the other children. Such medical attention is but one of the many measures offered by personal preventive medicine—the medical inspection, the tuberculin test, the x-ray examination—has become an integral part of our school system, then we shall have advanced a long step forward towards the realization health and education.

NOTE—

This article is a radio talk, arranged and given by Dr. Howard W. Haggard, Associate Professor of Physiology at Yale University, and broadcasted by the Eastman Kodak Company of Rochester, New York.

RED MENACE IN PACHOW DISTRICT

A dark shadow has fallen over the Pachow district. Two days before Christmas, a Communist army, numbering (as we later found out) nearly 20,000 men suddenly appeared on the Szechwan border, and captured T'ongchaing, a small city 60 miles east of Pachow. As all the soldiers had been withdrawn from these northern cities, to go to fight each other in Chengtu, Pachow was quite undefended. All through Christmas the city was in a state of extreme tension, knowing that the defending forces were coming toward us with top speed, but on the other hand, the Reds were advancing with an almost clear road before them. It was a desperate race. Soldiers got in first, dead beat after their forced marches. They began to arrive on the evening of Boxing day, and came pouring in all through that night and the following day. We were able to carry through our Christmas programme, though all hearts were very apprehensive, but we were strongly advised to disperse the school immediately the festivities were over, which we did. The next three weeks was a time of great strain, some days the soldiers would win a slight advantage, and other days they would be driven back a few miles. It proved that the Red army was not only far superior in numbers, but very well equipped with all kinds of artillery, and well trained in war tactics, and our men could scarcely hold their own.

During all this time the Pastor and leading Church members were urging us to retire from the city, but we naturally felt loth to leave the people; however, on January 9th, we received an urgent telegram from the British Consul in Chungking urging us to withdraw, and as we had been praying much for definite guidance, we felt this to be the Lord's leading. By this time all the well-to-do people and merchants had fled, and Pachow was an almost empty shell. Owing to the military impressing of all coolies, it had been impossible for some time to get men to carry, either chairs or loads, and people had been employing old women to carry away in baskets on their backs a few household utensils. It was the Lord's wondrous provision for us, that when we felt His leading to go, we were able to secure some coolies just released by the military, to carry a very few things, little else

besides bedding and some clothes. Everything else had to be left, and so we came away sad at heart. Within a day or two of our leaving the city, the situation became even more acute, and about a week later the city fell to the Reds.

We were very thankful that nearly all the remaining christians were able to escape the day before, the Pastor being the last to leave, as the Reds entered the city and opened the prisons. He gave an appalling picture of the flight from the city and the crying of the people as they came out, old and young, fleeing along with the retreating soldiers (who had put up no fight at all) and leaving their all behind them. The Reds occupied the city making the Mission premises their head quarters. A few days later we heard that they had torn down the doors and windows, and hacked up the floor boards, systematically looting every room. A fine new street consisting of two and three storied buildings has also been entirely destroyed, as well as the Government Boys' and Girls' schools, Public library, and other places. They have piled up inflammable stuffs on tables in houses throughout the city and have poured oil thereon, ready to burn the whole city if they have to retreat! Only the poorest of the poor are left in the city and they are not interfered with.

Our leaving Pachow coincided with a bitterly cold spell and heavy fall of snow—so much so that one day it was impossible to travel and we sat in AN INN, TRYING TO THAW ourselves round a fire of damp wood in the middle of the floor, which only served to make our eyes stream with tears. We reached Paoning on the 6th day and received a very warm welcome from the friends there. We had only been there a day or two when the rumours of the Red advance became very alarming, and the more wealthy Chinese began to leave. The Paoning friends were quietly packing up their belongings and putting them on boats. As the main way of exit was by way of the river, which might have been cut off by the Reds at several points, it was thought best that all the ladies and children should move on down to Shuenking.

Messrs. Funnell and Jackson and the two Doctors stayed in Paoning. The Hospital is able to carry on, and has had in some of the wounded soldiers from the Pachow district. Something like 10,000 soldiers have been rushed from Chengtu and other places, and the Generals do at last seem to be taking the matter seriously and preparing to stem the tide of advance.

Pastor Wang of Pachow has returned to En-iang-ho, an

outstation over 20 miles from the city, a place to which the troops have retreated. He writes that he has not heard of any of the Pachow Christians having lost their lives, though many must have lost their homes, their land, their all, indeed many in the Ch'ing-chiang-tu district are suffering from cold and hunger.

We know that we may count upon your prayers for the Christians in this time of trouble, especially remembering those recently baptised, who must be sorely tested by this fierce trial.

ETHEL WRIGHT

SUINING NEWS

As reported in the March "News", the two Missions and Churches held their annual meetings at Suining at the same date (middle of January). The guests had to eat much bitterness by the way, for they met with an exceptionally heavy fall of snow. And some were stopped by soldiers, but managed to get through later.

The Missionaries' houses were very full of lively guests during that week, and not only these, but the houses of the Chinese friends also.

We took advantage of the Chinese new year holiday time, to engage in special preaching and book-selling. And at the end of February and early in March, the annual festival of the Goddess of Mercy called for further special evangelistic efforts. Christians of this city and from considerable distances preached the Word daily at various strategic points, and large numbers of the pilgrims sat and listened. The Christian literature distributed copiously was accepted or bought by many, both men and women. The Bible and Tract Societies made helpful grants towards this work.

All the schools have large enrollments this term, and the teachers are very busy. Religious teaching goes on without hindrance, and the older girls in the North Gate School find this one of the more interesting of their subjects. One class has been compiling an illustrated book on "Finding God".

This school, and its hard-working teachers, are rejoicing in the addition to the staff of a new Matron and a new Nurse.

Dr. Ch'en of the Hospital, also, is rejoicing in the accession of Miss Wu, a nurse of long experience, trained at Hankow.

Mr. Fu, an old worker in the M.E.M., much valued and beloved, has retired, and Mr. Chang has come as Pastor of the M.E.M., Church, fresh from study at Nanking.

We had hoped the Civil War was over, and we should have peace, but matters were not happy between the Armies of Li and T'ien, and on the twelfth of March, a battle was fought about fifty li from here. Wounded men from one side were brought to the hospital here, and from the other to the Mission Hospital at Tungchwan. As a result of this dissension, the 29th army has retired from this city and the immediate neighbourhood.

The Doctor and his assistants were asked to attend not only to human patients, but a wounded horse came several times for help, and bullets were extracted satisfactorily.

There has been no more fighting since that day, but soldiers are posted at various points on the road, to examine the baggage and goods which pass. Brigands also have been reported as active from time to time, sometimes on the roads, and sometimes on the river.

During the last few days, diligent search has been made for Communists, and some have been found and summarily dealt with.

Foreign visitors have been few. Now that the motor road from Chengtu is through, Suining is side-tracked. But we were pleased to have Miss Harger stay some time after the Annual Meetings. Finally she left us for Chengtu via Tzechow, accompanied by Miss Pen, a teacher fresh from the United States, who had been helping at the North Gate for some months.

Last month, the foreign community was increased by 33½%, when Miss Parsons joined us. The whole community met and heartily welcomed her.

We enjoyed a short call from Dr. Lawrence and his mother, who passed through in March, on the way to Mien-chuhsien.

Mr. Wigham was away for twelve days visiting his old haunts in the Tungchwan District. The community again gathered in its thousands to welcome him back.

L. W.

NEWS FROM LUCHOW

Recently our Missionary community, seems to have scattered to the four winds all of a sudden. Mrs. Liversidge left for Chengtu. Mr. Pocklington for Kwansien and farther inland.

It seems like old times to see Mr. Toyne back again, after an absence from China of some years. He comes back to some of his old hunting ground. He and Mr. Adamson have gone out for some weeks into the country, including a visit to Yui Ling. It is yet too early to say what sort of a welcome they found in their journeyings.

Deaconess Paul of the German group, has just arrived from Chungking by small boat and hopes to proceed immediately, for Yui Ling and beyond.

Mr. Liversidge also spent several weeks recently in the country and reports a very profitable as well as friendly experience.

In the way of literature, he finds pretty much what we have been finding over our field, that people readily purchase scriptures everywhere.

One can never be sure of what results will follow from such work, but at least one thing is certain, that door is wide open and usually the OPEN door, means a call to service. Last week several of us spent the week in the country. During three days of that week, we sold fully two thousand gospels, as well as meeting many people in a friendly way.

In this way we find quite a number of our christian families who are just too far removed from a chapel to attend services. They welcome such a visit.

Considerable more opium is planted in some of these parts this year than ever before, although the yield will probably not be as good as ordinarily.

During one of our days in the country, there passed through some troops and although it was market day in one of the busiest towns, that one was a particularly dull day. The roads were practically deserted, such is the feeling towards the soldier.

A great deal of robbing is reported everywhere and particularly near the city. Taxes seem to have increased by leaps and bounds since the new army has come into control.

For quite a while the Post Office rooms were all piled ceiling high with all sorts of merchandise, which dealers refused to take away as a protest against the increased taxes on the same. Seemingly some arrangements were finally agreed upon. Dr. Ravelle made a rather hasty emergency call to Tzeliutsing.

A. C. HOFFMAN

FOWCHOW NOTES.

Mr. H. J. Veals spent a few days in Fowchow recently on his way home from Chungchow, having just completed a month's itinerary on that district. He reports the schools over the district well filled up.

Miss Florence Fee, of the W.M.S., has just returned from a two weeks' Evangelistic Campaign on the Chungchow District. She held a week's meetings in Chungchow city with a daily attendance of from 40 to 60 women, and four days' meetings at Gao Jia Djen. At this latter place on two afternoons Miss Fee and her Bible Woman went out into the country and held meetings at the homes of two of our church members. At each of these meetings there was a large attendance of near-by neighbors. At the Sunday Service in the town about 100 women were present crowding the chapel and school room beyond capacity.

E. W. Morgan and Pastor Din, Chairman of the District, have just returned from an itinerary of the Fowchow District. They found the schools well filled and many things to encourage in connection with the Evangelistic work. At one place they were taken by the local pastor to a *wan dzi six li* from town. Here the neighbors gathered at one of the homes for a meeting. Addresses were given on Health Education, Evils of Opium, Agriculture and Evangelism. The people were very warm in their welcome and listened with marked attention. This pastor has six such preaching centers encircling the town half of which are in the homes of non-Christians. On the adjoining Circuit there are thirteen such preaching centres of which about half are in non-Christian homes. On this Circuit

a very encouraging work is being done. At the Sunday Service five adults were baptized and seven were advanced to the standing of catechumens. In response to the appeal of their pastor at the Sunday evening service, the members pledged themselves to do their best to each lead one other to Christ before the end of the year. This would make an addition of 24 new members.

On Saturday afternoon, April 1st, the Fowchow Branch of the Council on Health Education, held its opening meeting for the spring term. The meeting was held on the church grounds with an attendance of about one thousand. General Yang, and a representative of the District Official, together with many other leading citizens were present. The two former gave addresses. Pastor Din and Dr. Wang of our hospital also spoke setting forth the objective and the program of the Society. In addition to these addresses, an interesting and appropriate program was given. The Society plans to hold weekly meetings for definite study. The subject for the first week is Personal Health, for the second Public Health, the third Prenatal Care, fourth The Family. On the fifth week a general meeting will be held at which a varied program will be given. This series will be repeated during the term. The leading citizens of Fowchow are showing an interest in the work our Society is trying to do. We trust this interest may deepen and find practical expression later in a city-wide movement along these lines.

E.W.M.

SPECIAL NOTICE

For Sale or to Rent. Two bungalows near Flying Bridges Temple, Mount O Mei. Price for large bungalow \$2000.00; small bungalow \$1500.00. Rental per summer season; large \$60.00; small \$40.

Inquiries may be addressed to either D. Fay, Y.M.C.A. or H. J. Openshaw, Chengtu.

SHUNKING NOTES.

In December last Miss S. Walldorf came back to her work in the Girls' School here. At the same time Miss A. Begemann arrived from Germany. This month we hope to welcome another new worker, Miss G. Büge. H. A. Gough and Miss A. G. Wilson are also expected to pass through on their way back to Paoning. The many refugees, who were in Shunking in February and March, have now returned to Nanpu, Paoning and beyond. Mr. G. H. Aldis has recovered from a mild attack of typhoid fever. General Yang Sen's influence in the city is becoming more apparent. The streets are being improved in outward appearance. Pavements have to be kept swept clean, rows of trees are again being planted at each side of the street, and the paper decorations on front doorways have all been washed off.

IN AND AROUND CHENGTU.

Dr. and Mrs. Agnew have again become a part of the Chengtu community. Our welcome to them has coincided with the farewells to Dr. Retta Kilborn and Mr. Franck.

Miss Esther Nelson of the Baptist Mission, after three years spent in the United States, is back in West China, and on the staff of the Men's Hospital at Sz Shen Sz.

Mr. McCurdy and Mr. Ho Bei Wan of Chungking are newly elected members of the University Board of Directors and will be in Chengtu for the meeting of the Board on April 17th.

Miss Dix and Miss Wright, of the C.I.M., who have been in Chengtu since their evacuation from Pachow, are leaving April 17th for Paoning.

Miss Carpenter and Miss Rowe, also of the C.I.M., who had to leave their station at Kuang Yuen owing to the Red invasion, are in Chengtu. Miss Carpenter plans to make a stay of some weeks.

Miss Wallis has returned to Paoning to take up work in the school.

DEPARTURE OF MR. P. J. KEATING.

The whole of the Foreign Community will feel a personal loss when Mr. Keating, the Postal Commissioner, leaves in the near future. After a long and varied experience he has reached the time for retirement and carries with him the congratulations and good wishes of all our readers.

In a recent conversation, Mr. Keating asked the Editor to express through the News his farewell wishes to all friends and to thank them for kindnesses received during his term of office in Chengtu. It will be impossible for him to call and say goodbye personally to every one much as he would wish to do so.

The News is glad to have this opportunity of expressing its appreciation and thanks for the courtesy and consideration which has invariably been shown by the Postal Commissioner in his official capacity and the geniality and kindness of Mr. Keating as a personal friend to all.

DEATH

The sympathy of the whole missionary community will be extended to Mr. and Mrs. G. Vinden of Panshanhsien in the loss of their little son, John Patrick, who passed away in the Chengtu Hospital after an operation.

On March 22nd, the funeral took place of Mr. Karl Eger who died in the Sz Shen Sz hospital after a long illness. Mr. Eger came to China from Germany and has resided in Chengtu for over twenty years, being engaged in business agency. He frequently attended the Community services and contributed generously to many of the missionary causes in and around Chengtu. The funeral services at the Men's Hospital Chapel and the Foreign Cemetery were conducted by the Revd. T. Torrance, assisted by others, and there was a large attendance of both Chinese and Foreign friends. Mr. Eger's daughter, who is being trained as a nurse in Chungking, was the chief mourner.

MT. OMEI TRANSPORTATION

Again it is time for us to remind you that plans for the trip up to Omei should be formed early. As transportation manager for the up-trip may I request that you send in your dates early. As in other years the order in which requests for dates and men are received, will also be the order of preference, if conflicts should occur. The charges for carriers have not yet been fixed, but will not vary much from last year. As last and other years, it will be possible to arrange for men to meet you here or at T'ang Fang or elsewhere. The rates for each of the several places as well as other charges, will when fixed be given for your information through the courtesy of the West China News in a succeeding issue.

Please send your orders to

F. J. REED.

KIATING.

UNIVERSITY BOOK CLUB

The accession list for February and March are as follows:--

Lehmann, R.	Invitation to the Waltz
Welzl, J.	Thirty Years in the Golden North
Ellis, N.A.T.	Six Lines
Wells, H. G.	The King who was a King
Priestley, J. B.	Faraway
Van der Sleen, W.G.N.	Four Months' Camping in the Him- alayas

Marling, P.	Rifleman and Hussar
Anonymous	Charlton
Baring, M.	In My End Is My Beginning
Bryant, A.	King Charles II.
Waugh, E.	Remote People
Kinross, A.	God and Tony Hewitt
Kaye-Smith, S.	Green Apple Harvest
Brown, I.	Marine Parade
Brown, W. N.	Friaryard
Onions, O.	The Spite of Heaven
Gaye, P. F.	Good Sir John
Blair, H.	1957
Mottram, R. H.	Europa's Beast
Stone, G. Z.	All the Daughters of Music
Freeman, H. W.	Down in the Valley
Baddeley, A.	One Hears a Drum
Robertson, T. B.	The Spirit of Research
Austin, M.	Starry Adventure
Clifford, H.	A Prince of Malaya
Maxwell, W. B.	The Concave Adventure
Vandercook, J. W.	Black Majesty
Douglas, L. C.	Forgive Us Our Trespasses
Thomas, W.	Hinduism Invades America
Wilson, C. G.	Chinatown Quest
Buck, P. S.	Sons
Sisson, F. M.	Shepherd's Staff
Remarque, E. M.	The Road Back
Appraisal Commission.	Rethinking Missions
Vulliamy, C. E.	John Wesley
Wu Lien-Teh (Mrs.)	Beauty of Beauties
Sewell, W. G.	The Land and Life of China
Mathews, J. J.	Wah'Kon-Tah
Lewis, E.	Trader Horn, Vols I & II
Gibbs, P.	The Anxious Days
McKenna, S.	Superstition

ALICE W. LINDSAY

FINAL TRIBUTES TO THE REVD. D. S. KERN.

Leaders and lay members of the United Church of Canada attended the funeral service of the Revd. D. S. Kern who died recently at Roblin, Manitoba, following a stroke which he had suffered two weeks previously, aged 55 years.

The funeral service was at Winnipeg, conducted by Principal John Mackay of Manitoba College and he was assisted by the Revd. W. O. Fryer, minister of Sparling United Church. Many beautiful floral tributes rested on the casket, a number of them being sent from places in Manitoba where Mr. Kern had worked.

Some old friends will remember Mr. Kern in Szechwan where he was a missionary for about 15 years. He has been back in Canada for a long period now but fellow-workers and others will follow with interest and sympathy the account of his call to higher service.

Suifu Notes.

The people of Suifu station were very happy that Dr. and Mrs. Mullett and Jack, with Betty and Molly Dickinson were able to stay here a full day on their way down river. Suifu seemed more quiet than usual after this merry group left.

Mr. & Mrs. Ririe and Mrs. Edgar also passed through recently but did not stay long.

During the past thirty-five days Dr. Li and two helpers from the Suifu hospital for men, with the Revd. Chester F. Wood, visited eighteen cities and towns of the district vaccinating 3,656 people. They visited government schools in most of these places, giving personal hygiene talks. Altogether Dr. Li gave to the schools and public fifty-eight such talks. Mr. Wood gave moral talks in these schools and held on the average three religious meetings a day with special Communion Services for church members in each place. Special attention was given to family worship and there are now over a hundred families in the district using the daily family devotional subjects prepared by our pastoral department.

This year sees the end of fifteen years of service to the Community by the Hospital for Women and Children, Suifu.

During that time 173,315 treatments have been given. Fifteen years ago in a Chinese inn 2,416 treatments were given. This year in a modern, foreign-built building the hospital gave 21,000 treatments. Dr. Emilie Bretthauer and Miss Lydia Crawford have been with the hospital since the beginning and now have a very efficient group of Chinese assistants to aid them in their ministries to the people.

CHUNGKING NEWS ITEMS.

Mr. R. Butler, Miss A Pike and Miss Jack arrived late in February from Kueichow.

Misses Sparling, Russell and Hansing left early in March for Shanghai on furlough.

Dr. Crawford and Dr. Beech were welcome guests in town when they escorted Dr. and Mrs. Anderson from Chengtu.

The members of the Missionary Association were delighted to have the opportunity of hearing Dr. Agnew and Mr. Homer Brown in their weekly Prayer Meeting hour. Both gentlemen had various other speaking engagements while in Chungking.

Dr. & Mrs. Wilford made a short motor visit to Chungking bringing Mr. Homer Brown and his daughters Isabel and Julia who are returning to Canada.

Dr. & Mrs. Mullett and Jack came by boat from Chengtu. With them were Betty and Molly Dickinson. Isabel and Julia Brown left for Shanghai with them.

Dr. Parry and Mr. Clements made a visit to Tongki early in March. Dr. Parry and Mrs. Parry are due to leave soon for furlough. They will be sorely missed in the Community.

The members of the foreign community have been enjoying the privilege of a 'Talkie' each Friday evening through the courtesy of the staff of the American Gunboat "Guam."

Mr. Hibbard made a short business trip to Chungking late in March.

Mrs. Dudley is making a splendid recovery from an appendicitis operation.

Mr. & Mrs. Scott and Patsy left early in March by the "Chi Ping" for Shanghai on furlough.

A very beautiful wedding was solemnized at the C.I.M. Residence on Saturday, March 18th, when Mr. R. Butler and Miss Allison Pike were united in marriage. Dr. Parry performed the ceremony. A reception followed at which Mrs. Howes was a delightful hostess. The happy couple received many tokens of the goodwill of the community. They are now on Chungking Hills for a brief honeymoon before returning to Mr. Butler's station in Kueichow.

Miss Munsell has been suffering from an attack of influenza, but is reported to be recovering nicely.

Sister Frieda Paul and Miss Buege reached Chungking about the middle of March. Sister Paul left by small boat for Pating in Kueichow, going via Yung-ning. Miss Buege is here directly from Germany. She is awaiting escort up to Shunking in East Szechwan to which station she has been appointed.

Mr. & Mrs. Ririe and Mrs. Edgar reached Chungking late in March and left for Shanghai. Mr. & Mrs. Ririe are going home after many years' service in China and are leaving behind them a unique feeling of loss to the work of this field. Mrs. Edgar is seeking medical attention at the coast for her arm.

Mr. & Mrs. Endicott and children left Chungking late in March for furlough in Canada. Many social functions before their departure marked the popularity of these missionaries.

Members of the foreign community were given a week end trip to Beh Beh and Wen Tang as the guests of Mr. Hoh of the Navigation Co. The trip was exceedingly well planned and provision was made for seeing all the landmarks of that enterprising and beautiful region. The peach trees were in bloom and ideal weather helped to make the outing a decided success.

Miss Wells has returned after a successful three weeks in the district.

M.J.C.

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Go Empress !

If you are travelling by C.P.R. we shall be glad to
book your passage.

Machinery Department

We are glad to announce that Mr. Nye Shen, a
graduate of Cornell University, is in charge
of this Department and will be glad to attend
to any enquiry relating to Machinery.