Address to the Nursing Staff of the Retreat, York, at the opening of the winter session by Charles Mercier MD, FRCP, FRCS Chairman of the Education Committee of the Medico-Psychological Association

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At the opening of the Winter Session,
October 30th, 1909, by

CHARLES MERCIER, M.D., F.R.C.P., F.R.C.S.

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BY

CHARLES MERCIER, M.D., F.R.C.P., F.R.C.S.,

Chairman of the Education Committee of the Medico-Psychological Association.

You are beginning a new year of practice and study in one of the most difficult and arduous of occupations, and Dr. Bedford Pierce has asked me to give you a send-off and to bid you God-speed on your way.

Some of you no doubt have gained, and others of you are studying with the intention of gaining, the certificate of competence of the Medico-Psychological Association, which is without doubt the highest and most honourable diploma to be attained by a professional nurse. It is the only diploma granted after examination by an entirely independent authority, which has no personal knowledge of the candidates; and a nurse who is diligent enough, and intelligent enough, to gain the diploma, is stamped for the rest of his life as thoroughly competent in the business of his life's choice. The Medico-Psychological Association has given a great deal of most earnest and untiring attention to the scheme of training and examination, and its Educational Committee, of which, after having served as Secretary for eleven years, I have the honour to be Chairman, spends many hours at every meeting of the Association in settling matters connected with the scheme of training and

examination, so that the standard of knowledge required of candidates shall be kept at a high level; so that the training may be thorough and complete: and so that justice shall be done to every candidate. As I am now serving, for the second or third time, as an examiner of the written portion of the examination, I dare say you will like to hear my opinion of the best means to secure success at the examination. It would not be proper for me to reveal any secrets, if there were secrets to reveal, but I violate no confidence when I advise you of the best course to take in order to gain the end which you so much desire. There are three things that you must do in order to gain your diploma. In the first place you must work at your studies; in the second you must study in your work; and in the third you must work and study.

The Medico-Psychological Association is served by various officials. It has its President, who changes from year to year; it has its Secretary who usually holds office for several years. It has its Registrar, to whom your Schedules and examination papers are sent, from whom you receive your diplomas, and who keeps the Register of the holders of the Certificate. It has also a Treasurer, whose office is not the least important. Our present Treasurer, to whom the Association owes a boundless debt, is Dr. Hayes Newington of Ticehurst. He became Treasurer on the death of Dr. Paul some twelve years ago. Dr. Paul died at a very advanced age at the end of the last century, having lived through the greater part of the century. He was old enough to have remembered the death of George III, who died, as you know in 1820, having celebrated his jubilee in 1809, exactly 100 years ago, on the 25th October. In the following year, the death of the Princess Amelia, his youngest and best loved child, so affected the old King that he lost his reason, and remained insane till his death. He was attended

by Dr. Willis, and placed in the care of two Keepers, as attendants were called then, and one of these Keepers was subsequently known to Dr. Paul, who used to tell the following ancedote. Dr. Paul asked the man what happened when the King became troublesome, and the Keeper replied that they knocked him down as flat as a flounder. That was the way in which insane persons were treated one hundred years ago. That was the way in which the highest person in the realm was treated when he was in the unhappy condition in which you see so many persons to-day treated with the greatest humanity and kindness. It was not considered any dereliction of duty on the part of the keepers to assault his Majesty with violence. It was the orthodox and customary mode of treating the insane, sanctioned by medical advice, sanctioned by custom, sanctioned by public opinion. In the engravings of old Bedlam by Hogarth, the keepers are represented patrolling the wards, each with a whip stuck in in his belt, for the chastisement of the unfortunate patients; and we learn from the medical writings of the time, that this chastisement was not merely for punishment, but was intended as a mode of treatment and a curative measure. In those days, the hardships and tortures to which the unfortunate insane were subjected were such as are now scarcely credible. They lay naked upon straw. They were chained to the walls and tables. They were handcuffed, shackled, muzzled with leather gags; they were drenched with bucketfuls of cold water; they were starved and beaten; they were tormented with fiendish ingenuity; they were not infrequently murdered outright. Some of the worst outrages were committed in a madhouse in York, and when a Committee was appointed to investigate the state of affairs here, an opportune fire took place, which destroyed many of the abominations, much of the evidence, and also some of the patients. It is scarcely possible for us to realise

the degree of brutality, that prevailed 100 years ago in all departments of life. Children at school were unmercifully flogged. The press gang seized upon men in the street and carried them off to serve in his Majesty's ships, or in the army. Soldiers and sailors were flogged for trivial offences; and, for moderate breaches of discipline, were sentenced to receive 7, 8, or 900, or even 1,000 lashes with the cat-o-nine-tails; and often died of such floggings. Debtors were imprisoned for life, and left in the prisons, forgotten, to starve. The favourite amusements of the aristocracy were cock-fighting and prize-fighting. Duels were of daily occurence. What wonder if, in such a state of affairs, the unfortunate insane were treated with methods of barbarism!

Well, we have changed all that. Children at school are no longer treated with merciless severity. Now a school-master, who ventures to punish a boy, is beset by exasperated mothers, and has to defend himself in the police court from a charge of assault. So far from soldiers and sailors being flogged, the newspapers are full of indignation if they do not have jam for tea. Bankruptcy is no longer the avenue to the prison. On the contrary, a Jew in the East-End of London accounts for his prosperity by the explanation that he has had several profitable bankruptcies. Cockfighting and bear baiting have given place to motoring and golf, and in no department of life has greater amelioration taken place than in the treatment of the insane. Never forget that the noble-minded man who first, in this country, put an end to the horrors of the old madhouses, was William Tuke; and the first institution in this country provided for the humane treatment of lunatics was the Retreat at York. The high reputation which this institution has gained throughout the world is in your hands to maintain and increase. You have a sacred trust to guard; and you are priviledged indeed in handing on to a future

generation, in the York Retreat, the tradition of humanity, mercy, and kindness, that has come down to our time from its noble founder.

It is not so very long,—it was the last time that our Association met at York, some 17 years ago, that the scheme for the training and examination of nurses and attendants was set on foot; and there are now between eight and nine thousand on the roll. Before that time, they went into the ward and picked up what knowledge they could from the example of their seniors, and very excellent nurses some of them made. But it was only those who were exceptionally endowed by nature with the two essentials who ever became really good nurses. I am not prepared to say that it is possible for anyone even now, with all the advantages of the training scheme, and the most attentive study of the handbook of the Association, to become good nurses without these two essentials. To that extent the good nurse is born and not made. But even with the best natural endowments, with real and earnest endeavour to succeed, it is not in human power to attain success in nursing, any more than in any other technical business, without careful and competent training. This is why these classes have been instituted; this is why so much time and attention is paid to instruction on the one hand, and to learning on the other; this is why attendants and nurses are so much better paid; and this is why so much more is expected of them than was required twenty years ago.

You heard me say there were two essentials that must be born in people if they were to become good nurses, and no doubt you will desire to know from me what they are. I will tell you. The first is sympathy, the second is capability; Neither sympathy nor capability is much use without the other: Both are essential, and now let me explain what I mean by them.

By capability I don't mean cleverness. Cleverness is all very well as an ornamental addition, if it happens to be there; but we can do very well without cleverness in an attendant. A person who is not clever may make a first-rate attendant; but an attendant, however brilliantly clever, who is not capable, is worthless. You all know what is meant by a clever person. He is bright, quick, lively. He can do many things, all of them middling well, and some very well. He can talk well, and has various accomplishments; he is good at games, and handy with his fingers; very often he is musical. If he is found fault with, and somehow he does have to be found fault with rather often he always has a most excellent excuse. He writes a good hand; expresses himself well; learns quickly; makes a good scholar; and is apt to have a very good opinion of himself. I see some of you looking round, and I dare say you see several persons who answer this description. A capable person has quite a different set of qualities, and a much more useful set; and one of the chief differences between cleverness, which is so useless, and capability, which is so necessary, is that, if you are not born clever, no amount of pains and study will make you so; but anyone may become capable by taking pains, though some people are born capable, and others never seem to recognise the desirability of becoming capable. What, then, do I mean by capability? I may call it by another name—trustworthiness. A capable person is a person on whom you can rely. If he undertakes to do a certain thing you are quite sure that thing will be done. The clever person can perhaps do the thing much quicker, and neater, and better, but somehow or other he is apt to forget it, or to put it off until too late. A capable person looks forward, and prepares for what is coming. A clever person is apt to wait till the occasion arises, and then it is too late to prepare. There

is an accident, and the doctor is sent for. The clever nurse tries to do what he thinks the doctor would do if he were there, and probably makes a mess of it. The capable nurse thinks what the doctor is likely to want and gets everything ready for him. When the doctor comes, the clever person can discribe what has happened in picturesque language, he makes it very interesting, perhaps makes it very amusing, but you don't feel confident that his account is correct. The capable person tells you briefly just what you want to know, and you feel that you can rely on his accuracy. A clever nurse is in charge of a suicidal patient, and you know that he will do his best to keep the patient amused, but you don't feel confident that he will have no opportunity of injuring himself. The clever person goes a railway journey. He is the life of the party; he makes himself generally agreeable, he learns half a dozen things on his way; he can explain the working of the engine, and point out the chief features of the country; and he will be apt to get out at the wrong station, or to arrive without his luggage. The capable person may not be as popular with his fellow travellers, nor impress them as much; but he gets there in time; he has all his luggage; and there is a fly to meet him and take him to his destination. The ability of the clever person enables him to pass examinations with ease and to win prizes; while the capability of the capable person enables us to rely on the certainty that he will do his duty. Of course, cleverness does not exclude capability. Fortunately, many clever people are capable also; but what I want to insist upon is that cleverness, which cannot be acquired by any amount of pains and industry, is really of little importance; while capability, which anyone may acquire if he chooses to take pains and persevere, is the most important quality that a man or woman can possess. A stupid person who is capable is worth a thousand clever

persons who cannot be trusted. There is a story told of John Bright asking the manager of a bank how he managed that, with such a multitude of officials, and such a huge business, they scarcely ever made a mistake. The manager's answer is worth remembering—"Mr. Bright," he said, "in this bank we never employ a clever man." If you are to be successful in your careers, it is necessary that you should be able to pass your examination, and obtain the certificate of the Association; and a very ordinary degree of ability will enable you to do this, if you are diligent, and mind your work; but passing the examinations and obtaining the diploma is not everything. It will not assure you of success; it will not ensure promotion; it will not even guarantee you employment. These things are attained by those only who master the secret of capability; who can be trusted; who can be relied on; who do their work, not with eyeservice as men pleasers, but in singleness of heart, fearing God.

No one can be a good nurse or attendant, on either the sane or the insane, who has not a sympathetic nature; and if I am asked what I mean by sympathy, I reply that it is described by St. Paul under the title of Charity. You remember what I refer to. It is in the 13th Chapter of I Corinthians. "Charity suffereth long, and is kind; charity envieth not; charity vaunteth not itself, is not puffed up, Doth not behave unseemly; seeketh not her own, is not easily provoked; thinketh no evil; rejoiceth not in iniquity, but rejoiceth in the truth; beareth all things; believeth all things; hopeth all things; endureth all things. Charity never faileth." I do not know how it is possible to put better the whole of the moral duty of a nurse than it is put n this passage. You may tell me that that is not the moral duty of the attendant on the insane only, but of every Christian man and woman. So it is, but in no situation in life is so much demand made upon the virtue of charity, or

sympathy, or love,—call it what you will, perhaps the beautiful scriptural term loving-kindness is the most expressive—as in the position of attendant on the insane. Let me take the qualities one by one.

"Charity suffereth long, and is kind." There you have the chief essential of a nurse's disposition. In other positions in life it is right to obey the apostolic precept—to suffer long and be kind,—but in no other position in life is the whole course of duty nullified, and made of no effect, and no use, without long-suffering and kindness. A butcher may be a brutal man, and still be a successful butcher. A judge may be a brute, and still be a successful judge; a soldier or sailor may be a brute, and still be a successful soldier or sailor. Even a doctor may be a brute, and a few doctors, such as the great Dr. Abernethy, have risen to eminence partly because of their brutal manners. But an attendant on the insane cannot, and must not, be a brute. He must suffer long and be kind. He must bear ingratitude, abuse, foul language, vile accusations, made, perhaps, not only against himself, but what is harder to bear, against those he most loves. This he must suffer, and it is long-suffering indeed. Amongst the insane, there are some who have a positively diabolical skill in searching out the raw spots in your mind and rubbing salt and pepper into them. They love to give pain, and gloat over the signs of the suffering they inflict. This must be endured. It must be endured without retaliation and without rejoinder. It is hard to endure, no doubt, especially when there seems so little of insanity about the patient. But it must be suffered, and it will be easier to suffer if we remember, first, that rejoinder and retaliation is a confession of defeat. It is the very object of the patient to provoke retaliation and to gloat over the successful provocation; and the way to defeat him, and to convince him of his own impotence to injure, is to suffer

long and be kind. Then, too, we should remember that, in retaliating, we lower ourselves to the level of the lunatic, and this alone should be sufficient safeguard. We lower ourselves to his level, and instantly we lose the moral power and influence that we have gained, perhaps, by weary days and weeks of endurance.

"Charity envieth not." The position of an attendant on the insane offers many opportunities for the exercise of the suppression of envy. Few things are more exasperating and and productive of envy than to see a patient, who with us has been rough, insubordinate, and unmanageable, become mild and amenable when turned over to the care of someone else. It is not a very infrequent experience. We have all had to suffer from it—doctors as well as nurses,—and our consolation is this, that it is not always the best nurse or doctor who has the best influence over any particular patient. You have heard of the survival of the fittest, and the word is well chosen. It is the fittest that survive, not the best, and it is the fittest nurse that can manage the patient; not necessarily the best, but the best for that particular case. There are plenty of occasions for envy in the life of a nurse in an institution. Other nurses get on better, not only with the patients, but with the authorities; other nurses have better opportunities, better luck, greater advantages in this way and that, better health, better strength, better looks. All are occasions and temptations to envy, but Charity, envieth not; and if a nurse is to be a good nurse, and to fit himself or herself for the proper performance of duty, envy must be cast out. One of the primary duties of every official in an institution is loyalty. Loyalty to the Committee, loyalty to the officers, loyalty to all superior officials, loyalty to equals, loyalty to patients, loyalty to the Institution, and loyalty to all that is best in himself. I see in your rules, that a nurse, who witnesses rouhgness to a patient and

does not report it, is considered equally guilty with the nurse who uses the roughness. That is a severe test of loyalty. It seems hard to reconcile loyalty to the Institution with loyalty to the fellow nurse. But the duty is clear. It is seen to be clear when we remember that the Institution is for the welfare of the patients. The welfare of the patients is paramount. It comes before everything; before your own comfort, before your own ease, whether of body or mind. It is hard to bear witness against a fellow officer, and perhaps a personal friend, but duty is often hard. It is not the less, but the more, duty on that account. If duty never required the sacrifice of personal inclination, there would be little merit indeed in its performance. The greater the sacrifice it requires, the more imperious should be the call of duty.

"Charity vaunteth not itself, is not puffed up." I spoke just now of the easy success of one nurse in dealing with a patient with whom another nurse has entirely failed; and as I showed that the nurse who failed has little occasion for envy, so now I impress on you that the nurse who succeeds has no justification for vaunting himself. It happens that his ways are more suitable to that particular patient. The patient, perhaps, takes a fancy to him. With the first attendant, the patient was out of sympathy. Goodness knows why these instinctive repulsions arise, but they do, and not in the insane only. There was once a major in the army who took a violent hatred to a grandfather clock, and at length threw it down stairs. It seemed to be always laugning at him. And prejudices still more irrational are conceived by the insane. We have to look on these things as all in a day's work. They are unpleasant, but they have to be borne. Then, as you are successful in your career, as you all will be, if you lay to heart the lessons that you will learn in the York Retreat, you will be advanced to

higher positions. You will gain promotion; and then remember that Charity is not puffed up. It is a very natural thing to put on "side" on such an occasion, and I have observed it even in officials of very elevated rank; but if they realised the impression that this attitude makes on others, and heard the ridicule that it excites, they would not be puffed up.

"Charity doth not behave unseemly." There is much that, in a nurse of the insane, is unseemly, that would not be unseemly in other people. Ordinary unseemly conduct, that would be unseemly in anyone, I leave to your own good taste and sense of propriety; but there are special unseemlinesses into which an attendant on the insane may fall, if he is not warned. It is unseemly to treat your patients like naughty children. It is unseemly to make promises to them that you don't intend to perform. It is unseemly to threaten them, especially as you would not be permitted to carry out your threats. It is unseemly to chaff them about their peculiarities. It is unseemly to babble about them outside the Institution, or, for the matter of that, inside the institution either. It is unseemly to make fun of them, to get them to show off their peculiarities. If you are in a private house, it is unseemly to gossip with the servants or visitors. It is unseemly to set the family by the ears; it is unseemly not to give and take; not to adapt yourself to the habits and methods of the family; not to step outside the strict margin of your own duties to help here and there if you can do so without neglecting them. It is unseemly to talk to your patient's friends about former patients. It is unseemly to mention the names of your patients outside their own families. It is unseemly to pretend to great familiarity with your patients or their friends. It is unseemly to presume on your position in the household in any way. In all these things

the charity that becomes an attendant doth not behave unseemly.

"Charity seeketh not her own." That is to say, you are not to be too punctilious in exacting what you think to be your rights. To allow yourselves to be imposed upon, is merely pandering to the selfishness of other people; but between this and exacting to the uttermost what you believe you are entitled to, there is a wide difference; and in deciding where to draw the line, it is better to suspect yourself of being too exacting. In private nursing, especially, the distress of the household at the terrible character of the illness, the anxiety, the discomfort of having strangers in the house, is already bad enough; and every effort should be made by the attendant to minimise this discomfort, and to make things work smoothly, and not put too much strain upon the household resources, by seeking exactingly to gain your own.

"Charity is not easily provoked." I have dealt already with the necessity of patience and forbearance, but it is impossible to lay too much stress upon them. To every attendant that entered my service I invariably put the question "Are you good tempered? If not, don't try it. You will only get yourself into dire trouble" There are some ill tempered people who don't appear to know that they are ill tempered, but most persons who are hasty in retaliation, or who harbour a long resentment, are perfectly well aware of their peculiarity; and if there is anyone among you who has recently joined the service, not fully knowing all the demands it makes upon the temper, and who is conscious of a hasty or sullen disposition, I implore him or her to throw up the place at once. It can never be a credit to you, and you can never be a credit to it. It means disaster sooner or later. Throw it up by all means before worse happens.

"Charity thinketh no evil." This is a quality which needs special cultivation by an attendant on the insane. The effect of insanity is very often to deteriorate the nature and character of the unfortunate people who are affected by it. They are, as Dr. Clouston has said, unloveable. It is very difficult for those who are constantly amongst them to remember that this unloveableness is the effect of their disease, a thing for which they are to pitied and not to be blamed; but Charity thinketh no evil. It makes great allowances. The French philosopher says: *Tout comprendre c'est tout pardonner*, that is to say: If we knew all, we should find an excuse for all they do. In the common phrase, they are not responsible. Their evil doings and evil sayings are the result of their disease, and when they recover, form the subject of bitter regret and remorse. Our task is to leave as little cause for this remorse as possible, and to this end we must think no evil. We must harbour no resentment. We must behave toward them as if we knew and understood that their conduct is not wickedness to be punished, but disease to be treated.

"Charity rejoiceth not in iniquity, but rejoiceth in the truth." It is a common practice, amongst those who are unaccustomed to the insane, to suppose that all the obligations of truth and honesty towards insane persons are annulled by their insanity. They are treated as if they had neither intelligence to understand, nor feelings to resent, when they are being deceived. It is difficult to use moderate language in dealing with this subject. I am constantly asked, when I go to visit patients, to allow myself to be introduced as an old friend of the family, as a casual visitor, as a lawyer, as a friend of the doctor, as anything but what I am. In such cases my first task is to explain that I am a doctor experienced in mental disorders, and that I have come to

examine the state of the patient's mind. Patients are often brought to institutions with the understanding that they are going to a nursing home, to an hotel, to an hydropathic establishment, to anything but a lunatic asylum; and, when the position is explained to them, the awakening is very bitter, and is often the cause of life-long estrangement from those who have deceived them. Never under any circumstances attempt to coax a lunatic by a lie. Never pretend that you are going to do other than you intend to do by them. To do so is iniquitious, and Charity rejoiceth not in iniquity, but rejoiceth in the truth. To do so is not only wrong, but it is short-sighted and silly. It may tide over a temporary difficulty, but only to make one tenfold worse in the future. Your patient won't go to bed, and you coax him or her upstairs with a promise that he is going to dress for dinner, or for a concert, or what not. It may get him upstairs without trouble; but, when you get upstairs, the trouble begins. He has to find out, sooner or later, that you have deceived him, and the result of that is not only immediate resentment and ructions at the moment, but an abiding distrust that you will never surmount. Follow after him no more, for he is as a bird escaped out of the net of the fowler. He will never trust you again, and without his confidence, you can do nothing with him. And this is not the worst. You have destroyed his confidence, not only in yourself, but in your colleagues, your officers, and your institution. He looks upon the place, not unnaturally, as the home of fraud and imposture, and you have seriously prejudiced his chances of recovery.

"Charity believeth all things, hopeth all things." These are precepts as necessary as the rest. The longer my experience of the insane, the more reluctant I am to look upon a case as hopeless, the more cautious I become in saying that a case cannot recover. Charity hopeth all

things. I have spent a life-time among the insane, and the most salient result of my experience is that I never despair of a patient's recovery. In dealing with the insane, we are exploring a country without maps, we are voyaging on a sea uncharted, and we do not know what surprise to-morrow may have in store for us. As fallible human nature is constituted, it is impossible to go on, month after month, and year after year, as we sometimes have to do, still striving for the recovery of a patient, still watching for the signs of improvement, that seem as if they never would come; it is impossible, I say, to maintain this thankless effort, unless we retain our hopefulness of the result. Charity hopeth all things, believeth all things. Always believe that improvement is possible. Always hope for recovery. You see here, no doubt, cases of that dire disease, general paralysis of the insane, and no doubt you have imbibed the notion that general paralysis is an incurable disease; and so it is at present. But not on that account is every general paralytic doomed to a speedy death. I saw the other day a man, affected with this disease, who has had it for nine years, and still lives a happy, if not a useful, life; and after I had given a hopeless forecast of speedy death, to the friends of a man suffering from undoubted general paralysis, I have been stultified by his recovery, and his maintenance of excellent mental health for years. Again, therefore, I say, never abandon hope. Few of us have been long at our business who have not seen patients recover after ten, or even fifteen years, of what appeared to be hopeless insanity. Therefore, again I say, Cherish that Charity which hopeth all things.

Lastly, "Charity never faileth." Charity is an abstract quality, and where it exists it never faileth, but we poor mortals, alas! must often fail. Who can look back on even a day of strenuous endeavour, and boast that he has not

failed in something? Depend upon it, as a great man said, whose bicentenary was celebrated last month, depend upon it, a fallible being will fail somewhere. To all of us there come times when the sun and the moon and the stars are darkened, and the clouds return after rain; when the keepers of the house tremble, and strong men bow themselves, and all the daughters of music are brought low; when fears are in the way, and the grasshopper is a burden. That is when the mind is over-wrought, and we begin to faint under the daily task. Then, in order that we may not fail, it is imperative that we should take some relaxation; and it is important that our relaxation should take a form as different as possible from our daily task. Get away from the insane, and all their belongings, and all their associations. Go into the country and enjoy the country air, and country life, and country scenes; or go into the town and rub shoulders with your sane fellowmen and fellowwomen. Get rid of the asylum atmosphere. Don't talk about the asylum and don't think about it. Get a complete mental change. Your leave of absence is liberal, let it be a means of absence. So you will approximate most closely to the Charity which never faileth.

This you will say, is a long catalogue of the moral qualities that have to be cultivated by an attendant on the insane. It is so, but it is not yet complete. There is yet another to complete the tale. I have already referred to it more than once incidentally, but it cannot be too often nor too strongly insisted on. It is reticence. Your profession is eminently and especially a confidential one, and it must be your endeavour to deserve the confidence that is placed in you. The existence of insanity in a family is a thing that every family desires to conceal. Whether that concealment is wise or foolish, is nothing to you. You are admitted into the family secret upon the implied understanding that with

you it is safe; and this trust you should regard as a sacred obligation. You are not to reveal the name of any patient you have ever known or heard of. You are not to babble and gossip about your patients, either with or without mentioning their names. You are not to talk of their peculiarities, either to your own friends, or to theirs, or to anyone else. You may think there is no harm in talking about your patients, if you do not mention their names; but you never know what means of indentification your hearers may not possess. Let me tell you an anecdote in illustration. You know that confession is, in the Roman Catholic Church, a practice and a sacred duty, and that no Roman Catholic priest has ever revealed a matter told to him under the seal of confession. A lady once remarked to a priest that he must hear some wonderful and terrible things in the confessional, and the priest replied that he did. The very first penitant who ever confessed to him made a confession of murder. Shortly after, a gentleman came in, and the lady took him to introduce him to the priest. "Oh!" said the gentleman, "there is no need to introduce me to M. l'Abbé, I have known him for many years; in fact I was his first penitent, and I promise you my confession surprised him!"

These, then, are the ideals towards which we have to strive. The mere acquisition of the necessary knowledge is easy. You will imbibe a knowledge of your duties partly from direct teaching and from your handbook, but mainly you will soak it in from the daily experience of your lives. But over and above knowledge, far beyond it, and more important, is character. It is character that counts, not cleverness, not even knowledge: Capability and sympathy first and before all; grit and determination; integrity, loyalty and uprightness; these are treasures that neither moth nor rust doth corrupt, and that thieves cannot break through and steal. The character and faculties with which

we are born are not unchangeable. They are so much raw material, which we can work up into very much what shape we please. If we are born without them, we cannot, by any effort of cultivation, acquire for ourselves an ear for music, or the ability to write poetry, or a melodious singing voice. There are some things we can never acquire, if we are not born with them; but we can all acquire capability if we set about to educate ourselves into it; and as to that sympathy, that divine charity, which is so well characterised by St. Paul, we are born with it in various measure, some more, and some less; but those who have little can cultivate it into much, and those who have much can cultivate it into more. The life's work that you have chosen is arduous and trying beyond the work of most, but it has great compensations. When you watch the subsidence of excitement, the removal of depression, the dispersion of suspicion, the gradual return to sanity; when you open the gates and say farewell, and bid God speed to a patient whom you have nursed through the valley of the shadow of death, and raised out of the deep mire of tribulation; when you send him home clothed and in his right mind, and think of the load of misery you have been instrumental in removing from him and from his family; you taste a joy as refined and as pure as that of the angels of heaven over the sinner that repenteth. Not to every one is it given to govern empires; to explore unknown lands; to discover the secrets of nature; or to enrich nations by some great invention; but we can all do well and truly the work that lies to our hands; we can all contribute to make the lives of those around us happier and better; and we can all live so that, at the inevitable hour when we have to bid an eternal farewell to this earthly scene, many will sorrow for our loss; and we can feel, with thankfulness, that the world is even a little happier because we have lived,—even a little better for our example.

— WILLIAM SESSIONS, —

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