

Annual report of the National Association for Supplying Medical Aid by Women to the Women of India.

Contributors

National Association for Supplying Medical Aid by Women to the Women of India.

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1926

ANNUAL REPORTS

OF THE

*I. The National Association for
Supplying Medical Aid by Women
to the Women of India*

(Countess of Dufferin's Fund

Including the

Women's Medical Service)

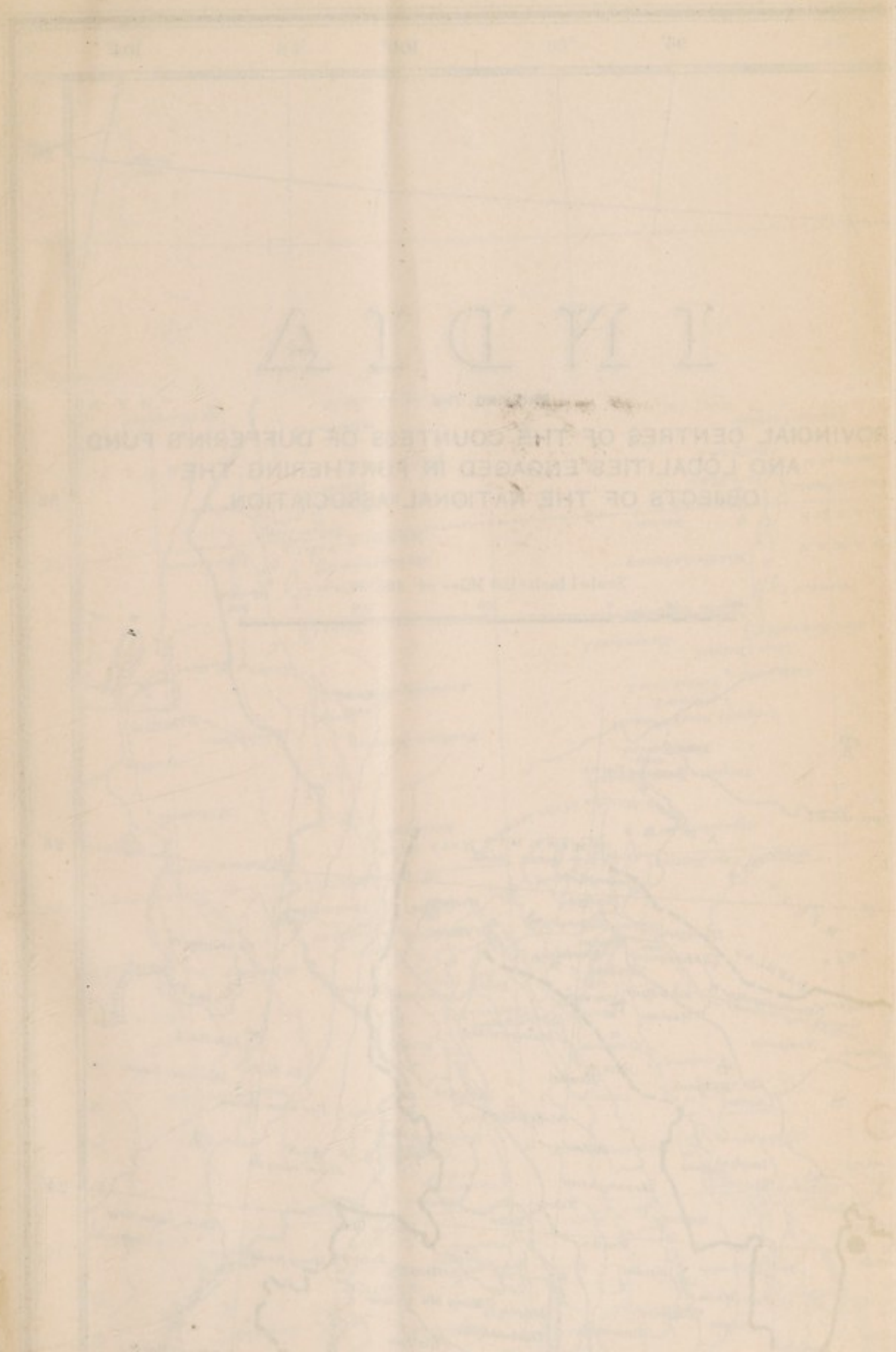
*II. The Victoria Memorial Scholarships
Fund*

*III. The Lady Chelmsford All-India
League for Maternity and Child
Welfare*

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Officers and Managing Bodies

of

I. The National Association for supplying Medical Aid by Women to the Women of India (Countess of Dufferin's Fund), by which is also controlled the Victoria Memorial Scholarships Fund.

II. The Lady Chelmsford All-India League for Maternity and Child Welfare.

President.

HER EXCELLENCY THE LADY IRWIN, C.I.

Council.

Chairman—The Hon'ble Sir HENRY MONCRIEFF SMITH, Kt., C.I.E., I.C.S.

Ex-Officio.

Sir FREDERIC GAUNTLETT, K.B.E.—*Treasurer.*

Miss A. C. SCOTT, M.B., Chief Medical Officer, W.M.S.—*Secretary.*

Col. NORMAN WALKER, I.M.S.—*Hon. Joint Secretary.*

Elected Members.

The Hon. Sir HENRY MONCRIEFF SMITH, Kt., C.I.E.
The Hon. Major-General SYMONS, C.S.I., O.B.E., D.G., I.M.S., Vice-Chairman.
Lady SHAFI.
Mrs. RICHEY.
Mr. K. C. ROY, C.I.E.
Mr. MOHAN LAL, M.L.C.
Mr. WEBB JOHNSON.
Mr. BREBNER, C.I.E.

Nominated Members.

The Hon. Raja Sir HARNAM SINGH, K.C.I.E.
Lady BLACKETT.
Mrs. BHOORE.
Diwan Bahadur TIRUVENKATA RANGACHARIAR, C.I.E., M.L.A.
Mr. K. C. NEOGY, M.L.A.

Co-opted Members.

Dr. C. L. HOULTON, W.M.S.

The Principal, Lady Hardinge Medical College.

Mrs. SYMONS.

Members chosen by the Provincial Branches.

Madras	Hon'ble Sir C. SANKARAN NAIR, Kt., C.I.E.
Bombay	Hon'ble Sir PURSHOTAMDAS THAKURDAS, M.B.E., C.I.E.
Bengal	Major H. SUHRAWARDY, M.L.C., M.D., F.R.C.S., I.L.M.
United Provinces	Colonel A. W. R. COCHRANE, I.M.S.
Punjab	Mrs. INGLIS.
Bihar and Orissa	A. H. LEY, Esq., C.I.E., I.C.S.
Central Provinces	The Hon'ble Sir MANAKJEE DADABHOY, Kt.
Assam	T. HAZLETT, Esq., M.L.A.
Delhi	Chief Medical Officer.
North-West Frontier Province.	Nawab Sahibzada Sir ABDUL QAYUM KHAN, K.C.I.E.
Baluchistan	Lt.-Col. DEAS, I.M.S.
Rajputana and Central India.	Chief Medical Officer, Rajputana.

Executive Committee.

HER EXCELLENCY THE LADY IRWIN, C.I.—*President.*

The Hon. Sir HENRY MONCRIEFF SMITH, Kt., C.I.E., L.C.S.—*Chairman.*

The Hon. Major-General SYMONS, C.S.I.,
Vice Chairman.

Sir FREDERIC GAUNTLETT, K.B.E.

Mrs. Richey.

Col. NORMAN WALKER, I.M.S.

Dr. A. C. SCOTT, W.M.S.

Secretaries.

Dr. A. C. SCOTT, M.B., C.M.O., W.M.S.—(*Secretary*).

Col. NORMAN WALKER, I.M.S.—(*Hon. Joint Secretary*).

Dr. RUTH YOUNG, B.Sc., M.B., Ch. B., Personal Assistant to Secretary for Maternity and Child Welfare Work.

Mrs. PITTAR.—(*Asst. Secretary*).

Treasurers.

Sir FREDERIC GAUNTLETT, K.B.E.—(*Hon. Treasurer*).

Mr. P. R. RAU.—(*Hon. Deputy Treasurer*).

Auditors.

Messrs. PRICE, WATERHOUSE, PEAT & Co., Cawnpore.

Hon. Solicitors.

Messrs. KESTIVEN, GOODING & Co., Calcutta.

Bankers.

Imperial Bank of India, Ltd.

Messrs. COUTTS & Co., 59, Strand, London.

REVISED RULES AND REGULATIONS

of

I. The National Association for supplying Medical Aid by Women to the Women of India (Countess of Dufferin's Fund).

II. The Lady Chelmsford All-India League for Maternity and Child Welfare.

(As passed at General Meetings of the Association and the League held at Simla on 20th July, 1923.)

Chapter I.—Membership.

1. There shall be the following grades of members of the $\frac{\text{Association}}{\text{League}}$:—

- (a) Patrons.
- (b) Vice-Patrons.
- (c) President.
- (d) Vice-Presidents.
- (e) Life Councillors.
- (f) Life Members.
- (g) Ordinary Members.

2. The Patrons, the Vice-Patrons and the Vice-Presidents shall be the persons holding these offices at the time these rules are made and such persons as may from time to time be nominated by the President on the advice of the Council.

3. The President shall be the wife of His Excellency the Viceroy. In her absence the power of filling the vacancy shall rest with His Excellency the Viceroy.

4. Life Councillors and Life Members shall be the persons holding these offices at the time these rules were made, and all donors of sums amounting in the aggregate to Rs. 5,000 and Rs. 500 respectively.

5. Ordinary members shall be the persons who hold office in the $\frac{\text{Association}}{\text{League}}$ or pay an annual subscription of not less than five rupees.

6. The Council may elect any person to Honorary Membership of any grade in recognition of services rendered to the $\frac{\text{Association}}{\text{League}}$.

7. The Secretary of the $\frac{\text{Association}}{\text{League}}$ shall maintain a register of members of the $\frac{\text{Association}}{\text{League}}$ and this register shall be open to inspection.

Chapter II.—General Meeting.

8. (a) The General Meeting of the $\frac{\text{Association}}{\text{League}}$ shall be held once a year at the Headquarters of the Government of India upon a date to be fixed by the President. Notices of such annual meetings shall be given at least one month before the date fixed, and such notice shall specify the business to be transacted. Members of all grades shall be entitled to attend and to vote on any question that may be submitted to the meeting for determination.

(b) At such annual Meeting eight members shall be elected to serve on the Council, an Auditor, who shall be a Chartered Accountant or other person skilled in accounts, shall be appointed, and the Annual Report and balance sheet for the past year, and Budget for the next year, shall be presented. Any other business may be brought forward with the assent of the President.

2. (a) An extraordinary meeting of the $\frac{\text{Association}}{\text{League}}$ may be convened at any time by the President for any purpose connected with the $\frac{\text{Association}}{\text{League}}$ and shall be convened on the written requisition of at least thirty members stating the object of such meeting.

(b) At least fourteen days' notice shall be given of such meeting, with the agenda to be brought before it, and no business other than that specified in such agenda shall be transacted.

10. (a) All General Meetings shall be presided over by the President, or in her absence by the Chairman of the Council or some other person appointed by the Chairman.

(b) All questions shall be decided by the votes of the members present, taken by show of hands, but any one present may demand a poll which shall forthwith be taken and the result declared by the officer presiding.

(c) In case of equality of votes the officer presiding shall have a second or casting vote.

Chapter III.—The Governing Body.

11. The Governing Body of the $\frac{\text{Association}}{\text{League}}$ for the purpose of the Act XXI of 1860 shall be the Council.

12. (1) The Council shall consist ordinarily of the President, a Chairman to be nominated by the President, who will preside in the absence of the President, the Treasurer, or Treasurers, the Secretary and Joint Secretaries, and 25 members of whom

(a) 12 shall be chosen by the committees of the provincial branches or of their equivalents in local administrations or Indian States in such manner as the Council, or, until the Council has been constituted, the President may determine:

(b) 8 shall be elected by the $\frac{\text{Association}}{\text{League}}$ at its annual general meeting from among the members of the $\frac{\text{Association}}{\text{League}}$ and

(c) 5 shall be nominated by the President.

(2) The Council shall have power to co-opt persons having expert knowledge in some branch of the $\frac{\text{Association's}}{\text{League's}}$ work, either as regular members of the Council, or *ad hoc* for the consideration of some particular matter specially affecting the $\frac{\text{Association's}}{\text{League's}}$ work. The number of persons so co-opted shall not at any one time exceed five. Any co-option shall cease at the will of the Council.

(3) Vacancies among elected members occurring between two annual General meetings shall be filled by the Council. An absence of six months out of India shall constitute a vacancy.

13. The Council, shall at the first meeting held after the Annual General Meeting in each year, elect from among themselves a Vice-Chairman who in the absence of the Chairman shall conduct the duties of the Chairman and exercise his powers. In the absence of both at any meeting, such meeting may elect its own Chairman from those present

14. An ordinary meeting of the Council shall be held at least once a year at such time and at such place as may be fixed by the President. The Annual Budget of the ^{Association} League shall be considered at one such meeting in each year.

15. An extraordinary meeting of the Council may be called at any time by the President.

16. Upon a requisition in writing made by any five members of the Council stating the object, the President shall call an extraordinary meeting.

17. Fourteen days' clear notice of any meeting of the Council, specifying the place, day and hour of the meeting and the general nature of the business to be transacted shall be given to every member of the Council by notice sent by post, provided that the accidental omission to give such notice to any of the members shall not invalidate any resolution passed at such meeting.

18. At a meeting of the Council eight members must be present in person to form a quorum.

19. If no quorum is present within half an hour of the time fixed for a meeting of the Council, the meeting shall be adjourned for at least one week to the same time and place and notice given again. At such adjourned meeting the business for which the meeting was called may be transacted whether a quorum is present or not.

20. In the event of an equality of votes at any meeting the presiding officer shall have a second or casting vote.

21. (1) The President shall appoint the Secretary and Joint Secretaries.

(2) The Council shall appoint the Treasurer or Treasurers.

(3) All other appointments shall be made by the Chairman, subject to the control of the Council.

22. The Council, subject to these rules, shall have general control of the affairs of the ^{Association} League with authority to make standing orders, regulating its own procedure, the procedure of the Executive Committee, and the powers and duties of its officers. In particular it shall provide for a proper record of all proceedings, and for an accurate account of all receipts and payments to be open to the inspection of the auditor.

Chapter IV.—Committees.

23. The Council shall from among the members of the ^{Association} League appoint an Executive Committee to perform the current duties of the ^{Association} League and such other duties as the Council may prescribe. The transactions of the Executive Committee shall be duly recorded and laid before the Council at its next meeting for information or confirmation. In case of emergency the Executive Committee may perform any duty and exercise any power of the Council. With the concurrence of the President the Executive Committee may appoint any sub-Committee and delegate to it any powers which may be necessary, but the proceedings of such sub-Committees shall in every case be reported for information or confirmation to the Executive Committee. The President and the Chairman of the Council shall be *ex-officio* members of all sub-Committees.

24. The Executive Committee shall consist of the President, the Chairman and Vice-Chairman of the Council, a Treasurer, the Secretary and Joint Secretary, the Director-General, Indian Medical Service, if he is willing to serve, and one member elected by the Council.

25. (1) All matters affecting the finances of the Association shall be referred to the League Executive Committee before being determined by the Council.

(2) The Executive Committee shall scrutinise the accounts of the Association and shall consider the Report of the Auditor. It shall also prepare the annual budget and submit it through the Council to the general meeting of the Association.
League

25A.* The Executive Committee of the Association shall administer the Victoria

* For the Association only. Memorial Scholarships Fund in accordance with the objects of that fund as defined on its inauguration by Her Excellency Lady Curzon in 1903, and shall keep separate accounts of all moneys received into or expended from the Fund. A separate report or section of a report shall be devoted annually to the working of this fund.

26. When a branch of the Association is formed, or any other body having for its League objects the purposes for which the Association is established, desires affiliation, the League case shall be examined by the Executive Committee, before being submitted to the Council, and no such branch shall be recognized or body affiliated without the vote of the Council. It shall be a condition of recognition or affiliation that each such branch or body shall have a regularly constituted committee.

27. Unless otherwise desired by them branches and affiliated bodies shall remain independent in the administration of their funds and in the conduct of their operations, but they shall furnish to the Council such reports and information as may be agreed upon mutually, and shall assist by correspondence and conference in the furtherance of their common objects. The Council shall have power, subject to the rules, to assist branches and affiliated bodies in such manner and to such an extent as it may consider to be conducive to the objects of the Association.
League

General.

28. All moneys at any time standing to the credit of the general account which shall not be required for current expenses, and which the Council shall not determine to transfer to the Building or any other account, shall be invested by the Treasurer or Treasurers in securities authorised by law for the investment of trust funds.

29. The Bankers of the Association in India shall be the Imperial Bank of India.
League

30. If any corporation or firm or body of trustees shall make any subscription or donations to the Association the privileges which it carries shall be exercised by such League persons as they shall nominate and in the case of a legacy the first-named Executor, unless the Testator has made other provisions.

31. None of these rules shall be repealed or altered and no new rules shall be made except by resolution passed by a majority of the Council present at an ordinary meeting and confirmed by resolution passed by a subsequent general meeting of the Association.
League





Photography.

Survey of India Office, Calcutta, 1927.

HER EXCELLENCY THE LADY IRWIN

CHAPTER I.

Introduction.

In this volume are included the reports for 1926 of three separate organisations under the Presidency of Her Excellency the wife of the Viceroy and Governor General of India. The actual funds are :—

**Scope of
the
Reports.**

I. The National Association for supplying medical aid by women to the women of India (Countess of Dufferin's Fund) including :—

(a) The original Dufferin Fund.

(b) The Women's Medical Service.

II. The Victoria Memorial Scholarships Fund.

III. The Lady Chelmsford All-India League for Maternity and Child Welfare.

The office of President of the National Association and its connected activities and of the League was held for the three first months of the year by Her Excellency the Countess of Reading, C.I., G.B.E. From April onwards Her Excellency the Lady Irwin was President.

**Office
Bearers of
the Funds.**

Sir Henry Moncrieff Smith acted as Chairman of the Funds, and Major-General Sir Charles MacWatt acted as Vice-Chairman until his retirement in April, when his successor as Director-General, Indian Medical Service, Major-General Symons, was appointed Vice-Chairman. General MacWatt has been connected with the central organisation of the Dufferin and allied Funds for more than eight years and has at all times given most valuable advice; he never grudged time to attend to files or meetings, his assistance to the Chief Medical Officer, Women's Medical Service, was most valued by her.

Mrs. Tonkinson left India in March. Her place on the Executive Committee was taken by Mrs. Richey.

There have been meetings of the Executive Committee of the Funds each month this year except in April.

Two meetings of the Council were also held at Viceregal Lodge. That in March in Delhi was followed immediately by the Annual General Meeting of the Funds, at both of which Her Excellency Lady Reading presided, for the last time prior to her departure for England and, in reply to an address of farewell on behalf of the Council by the Chairman, addressed the members as follows :—

“ Mr. Chairman, Ladies and Gentlemen, I have to thank you very sincerely for all that you have said. It affords me great pleasure that the services that I have been able to tender the last five years have been so much appreciated.

I feel that you only owe me one debt of gratitude, and that is that I leave you no Lady Reading Indian Fund to worry your heads about. As Sir Frederic Gauntlett has so ably shown us the money has been well handled and I feel happy to know that that is so. I leave no Fund to bear my name, but I am glad that the Lady Reading Hospital, the Lady Reading Health School, the Lady Reading Nurses, etc., in Calcutta, Lahore, Simla and various other places will not only remain after I have gone, but will continue to be in a sound financial position, and will not be a drag on public charity. I do feel that by emphasising the fact that the nurses must have better pay, better housing and better food that I have put the future of nursing on a far firmer basis than it has ever been before.

I hope that after the work that I have laboured to accomplish in order that everything should be put on a good financial footing, that Vicereines who come after me will have a far easier task than I have had. I confess that when I arrived in India I was staggered by the many charities and the complexity of dealing with them all, and I feel that we have made good in this respect and put them in a state where they can be easily administered.

In conclusion, I should like to thank the members of the Committee for all the support they have given me in these five years.

I would like to thank Dr. Scott to whose unfailing energy we owe so much and who has so ably administered the interests of the Council, and there are many more whom I should like to thank singly but must do so collectively ; but I think you know that my heart is very full to-day in saying good-bye to all the members of the Committee who have helped me so greatly. I am grateful to the Press who have always been so kind and helpful and who are represented here to-day by Mr. Buck and Mr. Roy."

Her Excellency the Lady Irwin presided at the Council meeting in September and addressed the Council for the first time, in the following terms :—

"I should like to thank you, Sir Henry, and the Members of the Council, for your very kind welcome to me as the new President of the Association.

I feel it is a great honour and privilege to be intimately connected during my time in India with a society of such high reputation and long standing, and I can assure you all that it will be my endeavour during my period of office to do everything in my power to help on the splendid work you are doing.

I have been studying the work of the past year, and should like to call your attention to a few points of interest ; but, before I do so, may I welcome you all here to-day especially the representatives from the various Provincial Branches.

As I said, the National Association for supplying medical aid by women to the women of India is of long standing. It is now in its 41st year, and as you know, devotes its funds chiefly to the training of Indian women as

doctors, but also gives grants to hospitals for women in different parts of India.

The Women's Medical Service is in its 12th year ; it is paid for entirely from the Government of India subsidy, granted for this purpose to the Countess of Dufferin's Fund. This Service, from having a cadre of 25 officers has now one of 44, also a Training Reserve of 8 women graduates of Indian Universities ; these graduates after 3 years' service in Women's Hospitals are granted United Kingdom scholarships with travelling expenses to England and back for the purpose of post graduate study fitting them for full membership of the Women's Medical Service. I am much interested to hear that during this year for the first time one of the graduates from the Lady Hardinge Medical College, Delhi, has been appointed to the Women's Medical Service, and will be joining the College as Professor of Anatomy for the coming season.

The provision of a service of fully qualified medical women is the foundation and pivot of all the work of the other funds.

In the first place, these highly qualified women are essential for the training of the students at the Lady Hardinge Medical College, Delhi, which students in their turn will take the place of their teachers in the Women's Medical Service, and continue to carry on the provision of medical aid by women to the women of India.

Secondly, they are essential to train the students in the Health Schools to be Health Visitors and Maternity Supervisors, without whom the Maternity and Child Welfare work under the Lady Chelmsford All-India League could not be carried on.

And lastly, they are essential for the training of Dais and Midwives so urgently needed for the rendering of adequate and skilled assistance to Indian women in child birth.

While speaking of the Chelmsford League, whose activities are mainly directed to the training of Health Visitors and propaganda, I should like to mention Lady Reading's last splendid gift to this work, which was to provide funds to build a new Health School in Delhi.

Hitherto students have had to reside in hired quarters and their instruction has been given in the various Municipal Welfare Centres in Delhi. The new School which bears Lady Reading's name, and to which is attached the model Rai Sahib Nanak Chand Infant Welfare Centre, will be ready for occupation by 12 selected students in October this year. When we are able to visit the School, which I hope it may be possible for us all, we shall, I feel sure, find a building worthy of its name and be able to appreciate the great benefit which Lady Reading through her generosity has conferred upon the work.

On the propaganda side, "Baby Week" inaugurated by Lady Reading is now a successful yearly event all over India, and a proposal is before you to-day to bring the management of this activity under the Executive Body of the Lady Chelmsford League, and therefore under this Council.

I have been asked to tell you that it is proposed to hold a Conference of Maternity and Child Welfare Workers and those interested in the movement in Delhi early in February next year. It is felt that the time has come to report progress on this work which has now secured a firm footing in India. Six years have elapsed since those interested in this increasingly important subject had the opportunity to meet together to discuss the various methods employed and the difficulties encountered. An All-India meeting of the kind suggested will certainly be helpful to all concerned, and will enable us to lay our plans for further progress with more efficiency.

Much has been done but much remains to be done especially on the preventive side.

First and foremost there is the terrible scourge of Tuberculosis, so especially active among the women and children in our large cities. Maternal and Infant mortality are still very high as compared with other civilized countries. Women in villages and even in small towns are in the large majority of cases still unable to obtain any medical aid from women, even in the shape of a trained nurse or midwife. Separate and specialised relief for women provided by Municipal Bodies and District Committees is so far practically nil, and it is a fact that, though the purdah system is less strict than it used to be, there are few Indian women even to-day who will allow themselves to be treated by men doctors for any but trivial ailments.

I have only briefly referred to a few of the major evils that are still practically untouched, but I think even these show how vast is the field of work which lies before us, and how necessary it is for us all to continue our efforts and to combine in devising the best and most efficacious means to overcome these difficulties and varied problems.

I can only assure you once more that it is with very real pleasure that I look forward to lending you whatever help I can to realise the purposes for which our associations exist."



*Forty-second Annual Report of
the National Association for
Supplying Medical Aid by
Women to the Women of India
for the year
1926*



COUNTESS OF DUFFERIN'S FUND.

Branches of the Fund.

(See Rules 26 and 27.)

Name of Branch.

Address of Secretary.

A.—OTHER THAN GOVERNORS' PROVINCES.

Baluchistan	C. M. O., Quetta.
Delhi	The Principal, Lady Hardinge Medical College, Delhi.
N.W.F.P.	C. M. O., Peshawar.
Bangalore	Hony. Secretary, C. of D.'s Fund, Grace Villa, Bangalore.

B.—GOVERNORS' PROVINCES.

Madras	Hony. Secretary, C. of D.'s Fund, 81, Mount Road, Cathedral Post Office, Madras.
Bombay—	
(1) Bombay	Surgeon to H. E. the Governor of Bombay.
(2) Karachi	Hony. Secretary, C. of D.'s Fund, Dufferin Hos- pital, Karachi.
Bengal	Surgeon to H. E. the Governor of Bengal.
U. P.	Superintendent, Medical Aid for Women, Office of I. G., C. H., Lucknow.
Punjab	Professor Shiv Dayal, M.A., 12, Mohn Lal Road, Lahore.
Bihar and Orissa	I. G., C. H., Patna.

C. P.—

(1) C. P.	Hony. Secretary, C. of D.'s Fund, Nagpur.
(2) Berar	Hony. Secretary, C. of D.'s Fund, Amraoti.
Assam	I. G., C. H., Shillong.

C.—UNITED KINGDOM.

United Kingdom	Miss Brooks, India Office.
----------------	----------------------------

COUNTESS OF DUFFERIN'S FUND.

Royal Patron.

HER MAJESTY THE QUEEN EMPRESS.

Patron in India.

HIS EXCELLENCY THE RIGHT HON'BLE FREDERICK LINDLEY WOOD, BARON
IRWIN OF KIRBY UNDERDALE, P.C., G.M.S.I., G.M.I.E., Viceroy and
GOVERNOR-GENERAL OF INDIA.

President.

HER EXCELLENCY THE LADY IRWIN, C.I.

Vice-Patrons.

Field Marshal H. R. H. The DUKE OF CONNAUGHT AND STRATHEARN, K.G., K.T., K.P.,
G.C.B., G.C.S.I., G.C.M.G., G.C.I.E., G.C.V.O., G.B.E., V.D.

The Most Hon'ble the DOWAGER MARCHIO-
NESS OF DUFFERIN AND AVA, V.A., C.I.,
G.B.E.

The Most Hon'ble the MARQUESS OF LANS-
DOWNE, K.G., G.C.S.I., G.C.M.G., G.C.I.E.,
D.C.L., LL.D.

The Most Hon'ble the MARCHIONESS OF
LANSLOWNE, C.I., G.B.E., V.A., C.H.

The Right Hon'ble the DOWAGER COUNTESS
OF LYTON, C.I., V.A.

The Right Hon'ble the DOWAGER COUNTESS
OF MINTO, C.I.

The Right Hon'ble BARON HARDINGE OF
PENSHURST, K.G., G.C.B., G.C.S.I., G.C.M.G.,
G.C.I.E., G.C.V.O., I.S.O.

VISCOUNTESS CHELMSFORD, C.I., G.B.E.

The Most Hon'ble the MARCHIONESS OF READ-
ING, C.I., G.B.E.

Lt.-Genl. H. E. H. The NIZAM OF HYDERABAD,
G.C.S.I., G.B.E.

H. H. The MAHARAJA OF BARODA, G.C.S.I.,
G.C.I.E.

H. H. The MAHARANA OF UDAIPUR, G.C.S.I.,
G.C.I.E., G.C.V.O.

H. H. The NAWAB SULTAN JAHAN BEGUM OF
BHOPAL, G.C.S.I., G.C.I.E., C.I., G.B.E.

Lt.-Col. H. H. The MAHARAJA OF BENARES,
G.C.S.I., G.C.I.E.

H. H. MAHARANI KEMPA NANJAMMANN
AVARU VANIVILAS SANNIDHANA, C.I.,
Maharani of Mysore.

H. H. The MAHARANI CHINKU RAJA SAHIBA
OF GWALIOR.

The MAHARANI OF HUTWA.

The Right Hon'ble LORD HARRIS, G.C.S.I.,
G.C.I.E., C.B.

The Hon'ble MAHARAJADHIRAJA OF DAR-
BHANGA, G.C.I.E., K.B.E.

The Lady WENLOCK, C.I.

The Lady AMPHILL, C.I., G.B.E.

The Lady NORTHCOTE, C.I., G.B.E.

The Hon'ble MAHARAJADHIRAJ BAHADUR
Sir BIJAY CHAND MAHTAB OF BURDWAN,
G.C.I.E., K.C.S.I., I.O.M.

Lady AITCHISON.

Lady LYALL.

Lady ELLIOTT.

The MAHARANI OF BURDWAN.

The TIKKA RANI SAHIBA OF KAPURTHALA.

H. H. The NAWAB OF RAMPUR, G.C.S.I.,
G.C.I.E., G.C.V.O.

Lt.-Col. H. H. The MAHARAO OF KOTAH,
G.C.S.I., G.C.I.E., G.B.E.

Vice-Presidents.

The Hon'ble Dr. MIAN SIR MUHAMMAD SHAFI,
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His Excellency Sir MALCOLM HAILEY, K.C.S.I.,
C.I.E.

E. J. BUCK, Esq., C.B.E.

Lady DADABHOY.

Rai Bahadur Sir ONKAR MAL JATIA.

*Life Councillors. (Rule 4.)***1885.**

H. H. The Maharaja of Kapurthala, G.C.S.I., G.C.I.E.

H. H. The Maharaja of Bikanir, G.C.S.I., G.C.I.E., G.C.V.O., G.B.E., K.C.B., LL.D.

1886.

H. H. The Maharao of Cutch, G.C.S.I., G.C.I.E.

1887.

H. H. The Maharao of Kotah, G.C.S.I., G.C.I.E., G.B.E.

1889.

Dame Millicent FAWCETT, 2, Gower Street, London.

Miss P. GARRET FAWCETT, 2, Gower Street, London.

1896.

The Hon. Raja Promoda Nath Roy of Dighapatia, Rajshahi District. Bengal.

Babu Anath Nath Mullick, Calcutta.

1897.

Raja Bhagwan Baksh Singh, of Amethi, Sultanpur, U.P.

1898.

Maharaja Sir Manindra Chandra Nandy, K.C.I.E., Kashimbazar, Bengal.

Raja Mohime Ranjan Roy Chowdhury of Kakina, Rangpur, Bengal

*Life Members. (Rule 4.)***1885.**

The Hon. Raja Sir Harnam Singh, K.C.I.E., Jullundur.

H. H. the Nawab of Tonk, G.C.S.I., G.C.I.E.

Dowager Rani of Tiloi, Rai Bareilly, U. P.

Rajadhiraja Sir Nahar Singhji, K.C.I.E., Chief of Shahpura, Rajputana.

H. H. The Maharaja of Orchha, G.C.S.I., G.C.I.E.

H. H. The Maharaja of Chhatarpur, Central India.

1887.

The Most Hon. The Marquess of Aberdeen and Temair, P.C., K.T., G.C.M.G., G.C.V.O.

1888.

Colonel HARRY COOPER, C.M.G., C.B.E., Pakenham Lodge, Bury St. Edmunds.

1890.

Sir P. P. HUTCHINS, K.C.S.I., Danesfort, Camberley, Surrey.

1891.

Lady HUTCHINS, Danesfort, Camberley, Surrey.

1896.

Sir M. D. CHALMERS, K.C.B., C.S.I., 8, Lauriston Road, Wimbledon, London.

1897.

Sir James L. WALKER, kt., C.I.E., Worplesdon Place, Worplesdon Surrey.

1898.

Lady J. L. WALKER, Worplesdon Place, Worplesdon Surrey.

1906.

Raja Manmatna Nath Rai Choudhury of Santosh, Bengal.

CHAPTER II.

The Countess of Dufferin's Fund.

The year 1926 has been one of steady work.

At the Autumn meeting of the Council the Chairman drew the attention of members representing the different Provincial Countess of Dufferin's Fund Committees who were present to the fact that W. M. S. officers who are paid by the Government of India subsidy to the Countess of Dufferin's Fund, can only be lent, *free of charge*, to work in the different Governors' Provinces in India if the hospital to which they are appointed is a hospital directly under the Countess of Dufferin's Fund Committee of that Province. At the request of the members present a reminder of this fact was sent to all provincial committees throughout India as an incentive to them to keep up the interest in the parent Fund which provides medical aid by women for the women of India. Since the inauguration of this fund in 1885 no other charitable Association has attempted to cope with the colossal task of providing India's women with doctors acceptable to them, that is to say, of their own sex; nor have Local Governments considered themselves responsible for providing medical aid for women apart from men in a measure comparable with the need, though certain of these Governments do give financial assistance in a small way to the Provincial Dufferin Fund Committees for the furtherance of women's Medical work in their Provinces.

The criticism is sometimes made by those who have not studied the subject thoroughly that by providing women doctors the purdah system is fostered and encouraged; and that, if the Dufferin Fund had not been created, the majority of Indian women would by now be seeking treatment by male doctors and attending the Civil hospitals as in-patients in much larger numbers than is actually the case at present. On the other hand it is probably true that no medical woman favours the purdah system, and that all do what they can to make their patients and patients' husbands realise the terrible injury inflicted on the health of women and children by its observance. Further it is arguable that if women prefer to have women doctors these should be provided by the State as well qualified and as well paid as the medical men provided for the general hospitals. It could hardly be contended that if no women teachers had been provided to teach in girls' schools all school girls in India would now be attending schools staffed by men teachers.

The need is still very great, and members of local legislatures might well be prompted to ask questions in the Councils as to how far the budget provision of the Province meets the medical needs of the women and children.

Tuitional activities.

The statement included in Annexure VI shows the number of women students now studying in Medical Colleges and Medical Schools. Four of these institutions are for women students only.

It will be seen that 256 students are studying for a degree, of whom 105 are in the Lady Hardinge Medical College, Delhi.

In the session 1925-26 10 students graduated. All who passed out have readily found employment in different parts of India.

Throughout the year, not less than 8 officers of the Women's Medical Service have continued to work in the Lady Hardinge Medical College as professors in the various subjects, and in addition these doctors have charge of patients in the 200 beds of the hospital attached to the College.

In addition to the teaching posts in the Lady Hardinge Medical College two officers of the Women's Medical Service have been engaged throughout the year as Principal and 2nd Medical Women at the Agra Medical School for women, under the Government of the United Provinces. To the Hospital attached to this school another young graduate belonging to the Women's Medical Service, Training Reserve, has been posted during the year as Resident Medical Officer.

The Women's Medical Service officer seconded to the Madras Government for charge of the Victoria Caste and Gosha Hospital is also Medical Superintendent of the Lady Willingdon School of Medicine in Madras.

Scholarships.

21 under-graduates in Medical Colleges at Delhi, Madras, Bombay and Calcutta are in receipt of Dufferin Fund Scholarships or stipends from trust funds administered by the Countess of Dufferin's Fund. Progress reports are regularly received of these scholars, who, when they obtain their degrees, are employed, if possible, as House Surgeons or House Physicians in hospitals staffed by medical women.

During the year under report 3 students holding Dufferin scholarships have obtained the M.B., B.S., of the Punjab University, from the Lady Hardinge Medical College, Delhi.

The Gilchrist Educational Trust has again made its annual grant of £150, making it possible for us to continue their stipends to 6 students at the Lady Hardinge Medical College. We are deeply indebted to this trust for its valuable help.

Officers seconded for administrative work in Governors' Provinces.

The post of Assistant to the Inspector General of Civil Hospitals in the Punjab is still in abeyance but in H. E. Sir Malcolm Hailey's speech to the Association of Medical Women in India at Lahore in November hope was expressed that this post would shortly be revived.

The post of Assistant to the Inspector General of Civil Hospitals in the United Provinces has been retained and held throughout the year by Dr. Shirin Commissariat seconded for the purpose from the Women's Medical

Service. No other Province has appointed a whole time woman administrative officer, but in Berar the Women's Medical Service officer in charge of the hospital at Akola acts as provincial inspectress of women's hospitals, to each of which she pays two visits a year.

The Dufferin Fund has continued to aid hospitals exclusively for women and children in two ways, (a) by supplying one or more Women's Medical Service officers, free of cost, to take medical charge, (b) by giving grants in aid to the limit of its income. In particular 5 non-recurring grants of Rs. 10,000 each were given to the Dufferin Hospital, Calcutta, for extending its nurses' quarters; to the Ishwari Memorial Hospital, Benares, for reflooring and refurnishing the wards; to the Victoria Zenana Hospital, Delhi, for building nurses quarters, thus freeing rooms for paying patients; and to the Dufferin Hospital, Nagpur, and the Lady Hardinge Hospital, Akola, where new hospitals were in course of construction, to build quarters for the Medical Officer in charge. **Hospitals aided.**

The Chief Medical Officer, Women's Medical Service, has inspected during the year the greater number of the hospitals shown in Annexure VI. Dr. Scott reports that, with one or two exceptions, there is a decided improvement in the equipment of these hospitals, many have added to the accommodation for patients, chiefly in the provision of maternity beds, for it has been the experience lately that women are more ready to come into hospital for confinements than they were 10 or even 5 years ago. This steady increase of maternity cases as in-patients is of immense benefit, not only to the mothers and infants concerned but in providing practice for students, nurses and midwives in the training institutions which are invariably attached to Dufferin Hospitals. The reason for this increase is not far to seek; it is due partly to the breaking down of superstitions and ignorance about hospitals and partly to the spread of education in maternity and child welfare work, by means of Baby Weeks, trained Health workers and other propaganda. There is also no doubt that the better nursing obtainable now a days in our women's hospitals is appreciated by the mothers, many of whom return again and again for subsequent confinements.

Hospitals in the Provinces are still very poorly supported by both the local Governments and the public, though the hospitals are used freely by both officials and non-officials. In one case the hospital, to which a doctor of the Women's Medical Service is supplied, receives from the public only one-third of the amount which is monthly subscribed to the local infirmary for diseased and decrepit cows. In more than one city the Municipal body has reduced its grant to the women's hospital and in one case the local Governments' grant has also been reduced.

There is a certain unfairness in the treatment of women's hospitals. Local bodies exact heavy rates, taxes for water, etc. These hospitals have to pay equally high customs and octroi duty as private individuals for drugs and

hospital necessities obtained from England, unprocurable in India, whereas the main Civil Hospital in the same town, being a Government institution, is exempt from these heavy items of expenditure. It will be a happy day for women's hospitals when legislators will vote money amounting to even half the annual expenditure of each.

Indian States.

The extent of the work being done in giving medical aid by women in Indian States is shown in Annexure VIII to this report.

Women's Medical Service (Senior Branch).

At the end of 1926 the strength of the cadre was 44 officers, 39 on duty and 5 on leave.

A list of sanctioned posts is given in Annexure IX.

Of the 44 officers in the Service on 31st December 1926, 24 had a European and 20 an Indian domicile, whilst of these latter 9 belonged to the domiciled community and 11 were Indians.

The Service has done good, steady conscientious work during the year.

Reports of the Service.

During the year the following left the Service :—

Dr. Hart, M.R.C.S., L.R.C.P., M.D.

Dr. O'Connor, M.B., B.Ch., B.A.O.

Dr. Scutt, M.R.C.S., L.R.C.P., M.B., B.S., Cert. Trop. Med.

Dr. Livingstone, M.A., M.B., Ch.B., D.P.H.

Dr. A. M. Watts, L.R.C.P. & S.E., L.F.P. & S. G., L.M., Rot.

Dr. A. M. Watts was one of the original members of the service recruited from doctors already working under the Dufferin Fund. Her service dates from 19th September 1908.

The following officers joined the Service to fill vacancies caused by resignations in 1925 :—

Dr. Pilley, M.B., M.R.C.S., L.R.C.P.

Dr. Morton, M.D., B.S., M.R.C.S., L.R.C.P., D.T.M. & H.

Dr. McDermott, M.B., B.S. (Punjab).

Dr. Acheson, M.B., B.S., M.R.C.S., L.R.C.P.

Dr. McDermott is the first Lady Hardinge Medical College graduate to be appointed to the Women's Medical Service.

The following returned from long leave during the year :—

Dr. Kamalakar, L.R.C.P. & S.E., L.F.P. & S.G., L.M.S.

Dr. Keess, M.R.C.S., L.R.C.P., L.M.S.

Dr. Commissariat, F.R.C.S.I., Cert. Prop. Med., L.M.S.

Dr. Hollway, M.B., B.S.

Dr. Bose, F.R.C.S.I.

The following are still on leave, 1st January :—

Dr. Hamilton Browne, M.B., Ch.M.
 Dr. Greig, M.B., Ch.B.
 Dr. Mohd. Ali, M.B., B.S. (Lucknow).
 Dr. Trouton, M.B., B.S., M.R.C.S., L.R.C.P.

Two officers, Doctors Davidson and Stewart, were married in 1926. Both are still employed in the Service for the present.

The reports sent in by officers of the Women's Medical Service have been summarised as follows :—

**Reports of
Hospitals.**

Lady Hardinge Medical College Hospital, Delhi. The Principal of the College, who is also Medical Superintendent of the Hospital, writes the following report for the period 1st January to 31st December 1926 :—

**Govern-
ment of
India
Areas,
Delhi
Province.**

Buildings.—The hospital is divided into 6 units :—

- I. Obstetric and Gynæcological Unit.
- II. Surgical Unit.
- III. Medical Unit.
- IV. Eye, Ear, Nose and Throat Unit.
- V. Electro-Therapeutic and X-Ray Department.
- VI. Pathology Department.

Developments.—No new buildings were erected during the year, but several parts of the hospital were brought into use, which, from financial stringency, had lain waste during the years since their completion. These were opened by the Marchioness of Reading on 17th March 1926, and comprise :—

- (a) a Unit of 60 beds, including sick rooms for students and nurses,
- (b) the X-Ray Department, and
- (c) a set of five Upstairs Single Rooms for paying patients.

In spite of the extra accommodation, a serious effort was made to keep down the daily average number of in-door patients to 200, the sanctioned number, and for the year it works out at 204.2, as against 179.9 the last year.

I. Obstetric and Gynæcological Unit.

Surgeon	Miss G. J. Campbell, M.D., Ch.B. (Glasgow), W.M.S.
Assistant Surgeon	Miss C. D'Monte, M.B., B.S. (Bombay).
House Surgeons	Miss Lakshmi Devi, M.B., B.S., Punjab.* Mrs. Ishwar Kaur, M.B., B.S. Punjab. Mrs. M. Balambal, M.B., B.S., Punjab.

In this Unit the numbers of admissions was 1,709, as against 1,355 last year. There were 383 cases of child birth (an increase of 95), and of these

* Each in turn for 4 months or so.

190 were abnormal, including 19 births by Cæsarian section, and one full-time abdominal gestation. 1,147 operations were performed under chloroform or ether, and 158 patients had abdominal operations for various serious maladies. In as many as 60 cases, after the strictly gynæcological surgery was completed, we had to remove the appendix as a subsidiary procedure. Towards the end of the year, Dr. G. P. Patel, Acting Professor of Pathology, asked for our appendixes (or appendices) to examine, so we sent her the last eight, each in a sterile test tube. Her remarks on the conditions found are of decided interest, as showing one unexpected cause of chronic appendicitis that we find so common in Indian women, and not less common in those who are vegetarians.

In this Unit, of the total number of patients operated on under general anæsthesia 11 failed to recover, mostly on account of advanced malignant disease, but the others all did well.

Dr. C. D'Monte, the invaluable assistant in this department, had to be on sick leave during the last three months of the year, and her place was taken by Miss J. Cooper, M.B., B.S. (Punjab), L.R.C.P. (London), M.R.C.S. (England), the first graduate of the College to add British qualification to her Indian degree. Needless to say, the successive House Surgeons, and the students and nurses under training, obtained, in this Unit, ample experience in the branches of work that will be their chief concern in later years.

II. Surgical Unit.

Surgeon	Miss E. Pfeil, M.B., B.S. (London), W.M.S.
Assistant Surgeon	Miss Gobindar Kaur, M.B., B.S. (Punjab).
House Surgeons (in succession).	Miss Lakshmi Devi, M.B., B.S. (Punjab).
	Miss S. Matthews, M.B., B.S. (Punjab).
	Miss Ishwar Kaur, M.B., B.S. (Punjab).
	Miss U. D'Monte, M.B., B.S. (Bombay).

Dr. Pfeil reports :—To this Unit there have been 497 admissions, the average number of patients being 48·8. For a number of them long stay in the wards is essential, orthopædic and tuberculous patients needing a long course of treatment.

410 operations have been performed, including 35 abdominal sections. The success of the treatment owes much to the untiring work and efficient care of Dr. Gobindar Kaur, the Assistant Surgeon.

III. Medical Unit.

Physician	Dr. R. M. Scutt, M.B., B.S. (London), D.T.M. & H. (England), W.M.S.
Assistant Physician	Dr. Udaiwadia, M.B., B.S. (Bombay).
House Physicians	As in Obstetric Unit,

Dr. Scutt reports :—The admissions to this Unit numbered 1291, an increase of 168 over the previous year, and the average daily number of patients was 66·58; thus the average stay in hospital of each patient was 19 days. The number of patients admitted for tuberculous disease was 168.

There was an epidemic of a very severe type of malaria in this district during the early autumn, and 127 patients were admitted, of whom 34 were found to have malignant tertian parasites in their blood.

IV. Eye, Ear, Nose and Throat Unit.

Surgeon	Miss R. Roulston, M.B., Ch.B. (Glasgow), D.O. (Oxford), W.M.S.
House Surgeon	Miss L. Hulasi Ram, M.B., B.S. (Punjab).

Dr. Roulston reports :—The new quarters for this Unit, which were opened by Lady Reading in March 1926, consist of one large ward of 25 beds and a second ward with 6 beds for Cataract patients. The new operating theatre in connection with this Department is nearing completion.

During 1926 there were 341 admissions and 309 operations. Of these 191 were operations on the eye, 30 being for cataract, and 95 for entropion. There were 103 operations on the Throat and Nose, and of these 27 were for the removal of tonsils and adenoids.

In the Out-Patient Department 5,027 patients were seen.

V. Electro-Therapeutic and X-Ray Departments.

Specialist	Miss E. Pilley, M.R.C.S., L.R.C.P. (London), W.M.S.
Part-time Assistant	Miss S. Matthew, M.B., B.S. (Punjab).

Dr. Pilley reports :—During the year the Electro-therapeutic department has been open three days a week, the total number of treatments being 2,348. Cases of osteomalacia still predominate, forming 50 per cent of the total.

The usefulness of the department has lately been extended by the addition of a high frequency apparatus, and a diathermy apparatus. An ultra violet therapy lamp is badly needed for the treatment of ricketts and osteomalacia.

X-Ray Department.

The new X-Ray department, which was opened by Lady Reading on 17th March, had unfortunately to be closed during three of the summer months. It had already proved its usefulness, and it is a great asset to have close co-operation between clinician and radiologist.

In all 382 examinations have been carried out, including 15 barium meals, 7 examinations of the urinary tract, and 9 of the biliary tract.

VI. Pathology Department.

Pathologist	Miss L. S. Chatterji, M.B., Ch.B. (Aberdeen), D.P.H. (Cambridge), W.M.S.
Assistant Pathologist	Miss A. Cama, M.B., B.S. (Bombay), L.R.C.P., M.R.C.S. (England).
Second Assistant of House Physician Grade.	Miss M. Worsley, M.B., B.S. (Punjab).

Dr. Chatterji reports :—During the year 2,022 examinations have been made of clinical material from the Hospital.

The blood examinations numbered 614, of which more than 80 per cent were for evidence of malarial infection.

Dr. G. P. Patel, M.B., B.S. (London), D.T.M. & H. (Calcutta), W.M.S., who showed her versatility once more, by acting as Pathologist for nearly three months during Dr. Livingstone's sick leave, after acting as Physician for four months during Dr. Scutt's sick leave, draws attention to the large amount of work still to be done in cataloguing the Museum specimens. Dr. Patel also remarks "Particular interest of late was taken in the examination of appendices, and in a series of eight received from the Gynæcological Unit, more than half showed the presence of *Oxyures Vermiculares*, one appendix containing as many as 14 of these parasites."

Summary of statistics.—3,867 in-door patients were admitted, as against 3,012 last year. The daily average number of in-door patients, by Units, was :—

Obstetric and Gynæcological Unit	68·82
Medical Unit	66·58
Surgical Unit	48·8
Eye, Ear, Nose and Throat Unit	20·
TOTAL	204·2

Out-Patients' Department.—At the out-door department 11,670 patients made 23,423 attendances. Until the Lady Hardinge Serai is built, or there is easy access to New Delhi, by train or tram car, from the Old City, our Out-Patients' Department is not likely to increase its numbers much further. We were therefore glad to learn, during the year, that the trustees of the Serai Fund have decided to build it on a site close to the Hospital, as soon as the ground can be cleared, and that half the available accommodation in the Serai will be reserved for patients attending our out-door department, and for relatives of our in-door patients.

Self-support.—As in former years, patients able to do so have been encouraged to pay part of the cost of their treatment. During the 12 months

ending on the 30th September 1926, a sum of Rs. 29,147 was received from patients and used to help in maintaining the hospital. This is in addition to payments for diet and contributions to the Donation Fund. We believe that it is an unprecedentedly large sum for a hospital opened less than 10 years ago. It indicates much confidence on the part of the public, and also a sustained effort on the part of members of the medical and nursing staff, not merely to cure, but to satisfy the patients, and to make their stay in hospital as comfortable as possible.

Nursing-Staff and Nurses' Training School.—

Nursing Superintendent . Miss L. Bonser, previously sister, Guys Hospital.

5 English sisters.

3 Indian charge nurses.

In addition there are 21 Indian Staff Nurses, of whom 12 were trained in this College Hospital. Several of our best Staff Nurses left during the year to join posts with higher salaries elsewhere.

Miss L. Bonser, Nursing Superintendent, supplies the following details of the Nurses' Training School.

The number of pupil nurses under training was 40, and the examination results for 1926 are as follows :—

In March 8 candidates entered for the Final (3rd Year) Examinations in General Nursing, held by the North India Board of Examiners for Nurses, and 6 passed, 3 being placed in the 1st class, and taking the first three places in the list of successful candidates. The remaining 2 passed in October. 10 entered for the Examination on the second year's work, of whom 7 passed, one being placed in the 1st class. The first two places in the examination fell to our pupil nurses. The 3 candidates who failed in March passed in October. For the examination on the first year's work, 8 entered, of whom 6 passed, 2 being placed in the 1st class. The above are excellent results.

Six nurses entered for the Diploma in Midwifery of the Punjab Central Midwives Board, but only two obtained it, so, with the approval of the Executive Committee, the further period of training for this examination is being changed from six months to one year.

General.—Inspections and other events affecting both Hospital and College, are dealt with in the College Report. It should, however, be recorded that Her Excellency the Lady Irwin visited all parts of the hospital, as well as of the College, on 11th November 1926, and we desire to express our gratitude for the sympathetic interest taken by her in the work here, and for her kindness in sending flowers, on various occasions, to brighten the wards.

Victoria Zenana Hospital, Delhi.—Dr. Keane reports difficulties in filling vacant posts in her staff owing to the low pay offered by her Committee. Shortage of water during the summer months has also greatly added to her

anxieties. Owing to the generosity of the Dufferin Fund, the Chief Commissioner, Delhi Province, and the Delhi Municipal Committee, funds are at last available for new quarters for the nurses, which are now being built, and it is hoped that the new block will be ready for occupation early in 1927. This will free the present nurses' home for private patients, accommodation for whom is always in demand.

Simla.

Lady Reading Hospital for Women and Children, Simla.—Dr. Houlton reports that "the year 1926 has been a very strenuous one as the number of patients, both in-door and out-door, has greatly increased, without a corresponding increase in the staff."

It seems almost certain that the gloomy prophecies of those who foretold that the hospital, beautifully situated and well equipped by Lady Reading, would not be appreciated by the Indian community and would be more or less empty, will never be fulfilled. Each year has shown the increasing popularity of the hospital.

The statistics given below are for the three years the hospital has been open :—

	1924.	1925.	1926.
Total number of new out-patients . . .	5,135	4,170	4,559
„ „ „ new and old out-patients	14,869	15,483	19,019
„ „ „ In-patients . . .	820	896	1,008
„ „ „ Labour cases . . .	107	109	147
„ „ „ Operations . . .	348	410	763
„ „ „ Abdominal Operations .	26	30	40

The medical cases have also been of a varied and interesting character. During the year 28 cases of acute Pneumonia, many with both lungs affected, were admitted. All recovered. This record speaks well for the good nursing of the staff.

No new buildings have been erected this year, but the Governing Body has decided that it is necessary to increase the accommodation for the nursing staff and building operations have already started, under the kind direction of Mr. Brebner and Mr. Trevor-Jones.

The Children's Ward has been greatly improved by a beautiful marble floor which was Lady Reading's parting gift. She also presented a valuable microscope and galvanic battery. Both of them have been of great benefit to the hospital.

We have to lament the loss of Lady Reading as President of our Governing Body. From the laying of the foundation stone of the hospital, she showed the keenest interest in the institution and her departure from India was a grievous loss.

We are glad to welcome Her Excellency the Lady Irwin as our new President. She visited the hospital soon after her arrival in India and in many ways has shown that we may depend upon her interest and support.

The results of the examinations of the probationer nurses have been very good. Four 2nd year and three 1st year nurses entered for the North India Board's examination. All passed well.

Municipal Hospital, Dera Ismail Khan.—Dr. Bolton reports : “ During 1926 the work in all departments of the hospital has shown a satisfactory increase and the usual visits to the District Towns and Villages have been paid. Various alterations have been made in the hospital and Compound :— **North-West Frontier Province.**

- (A) New quarters for the Matron built from a fund supplied by the Chief Medical Officer of the Province.
- (B) Two very necessary drains were put in.
- (C) The labour room has been tiled and had a marble floor put in and a marble topped table bought. The old room was very unsatisfactory.
- (D) The well has been refitted.

On the 19th December Lady Bolton came and opened the New Dais' Training Centre for the provincial dais. Ten dais are being trained, their cases to be taken both in the Zenana Hospital and the City.

Lady Sandeman Dufferin Hospital, Quetta.—Report was not received in time for publication. **Baluchistan.**

The Government Victoria Caste and Gosha Hospital, Madras. has as Medical Superintendent a seconded officer of the Women's Medical Service, Dr. O'Brien Beadon, who reports “ There is again an increase in the work of this hospital. In-patient figures show an increase of over 300 above the figures for the corresponding day of 1926. **Madras Presidency.**

A large number of small children are being admitted for treatment and we find that the mothers are now willing to leave them alone in hospital—a couple of years ago the mothers insisted on staying with their infants. Several cases of pneumonia and other pulmonary troubles in both infants and adults have been treated with diathermy with very satisfactory results.

The general surgical work is increasing, and among the major operations this year we have had one gastro-enterostomy and two ileo-colic anastomoses.

Dr. M. John, F.R.C.S. (Edin.), has been appointed as Lecturer in Medicine in place of Dr. A. B. Hardy who has gone to England for Post-Graduate study for two years on a scholarship awarded by the Government of Madras.

The students are working well and we hope to have good results in the Final Examination in April.

The average results for the 1st, 2nd and 3rd year Examinations in April 1926 were very good and the percentage of passes ranged between 86 and 93 for the 3 years.

**Vizaga-
patam.**

Victoria Hospital.—Dr. Lazarus writes “ the construction of the Special Wards which was begun in April is almost completed and two of the wards are already in use. Government have sanctioned an additional grant of Rs. 4,000 towards the much needed verandah on the western side of the new Surgical and Obstetrical block. The kitchens for mofussil patients kindly contributed by the District Board are also under construction.

Rs. 1,50,000 are required for the acquisition of land to relieve the surrounding congestion and for the erection of separate out-patients, Septic and Sanitary blocks the want of which is most keenly felt. It is hardly conceivable how a crowd of 408 patients could be attended to in one morning in a room about 18 ft. sq., while the front verandah is often packed with nine beds of septic cases. The price of land is going up rapidly owing to the development of the harbour, and further delay in acquisition means, more money to be spent on land alone.

There was a marked increase in the number of selected operations, abdominal sections being twice as many as last year. Owing to the greater amount of antenatal work, there was a marked decrease in abnormal labours and a proportionate increase in normal labours.

**Bombay
Presi-
dency.
Surat.**

Seth Morarbhaj Vajbhukhandas Hospital.—Dr. Kamalakar took over charge of this important hospital after a period in which there has been many changes in the staff. She speaks of the supreme importance of having a reliable nursing staff adequate to the needs of the Hospital. She says “ Women from far off districts such as Broach and Ahmedabad have begun to take advantage of the medical aid that is given in this hospital. The paying cabins which cost Rs. 4 per day without food are growing in demand and this is a matter for satisfaction as they form one of the sources for getting funds for the Hospital. Women have begun to exhibit their love for the Hospital by presenting when leaving either a chair, some linen or a bedstead as a remembrance.

The financial condition of the Hospital requires attention, and in order to bring it up to date perfection in every way large funds are necessary.”

Dr. Kamalakar points out that the difficulty of filling vacancies in the nursing staff is great on account of the Caste prejudice, and unless the Nurses' quarters are built as self-contained cabins where each nurse could have her own cooking arrangements it seems a matter of doubtful consideration whether women from districts will come into Surat to take advantage of the course of midwifery and nursing that is offered.

Shikarpur.

Dufferin Hospital.—Dr. M. C. Murphy reports :—“ There has been a marked increase in the work of this hospital during the past year, though it has been much hampered by the unsuitable building, insanitary conditions, lack of trained nurse and of funds and the poor equipment.

Up to date 467 maternity cases have been attended compared with 352 last year, and 154 major operations have been performed, compared with 82 last year.

The greatest increase has been in the in-patient attendance, which has risen from 744 last year to 1,153 this year. This has necessitated serious overcrowding at times, and for some months past the work has been carried on under great difficulties owing to the want of the commonest essentials. The building of the new block has not yet been begun nor has the long promised well materialised.

Through the exertions of Mr. Chainrai, Assistant Collector, Karachi, subscriptions were raised for 24 iron beds with bedclothes and 22 lockers. Mr. Allah Baksh has built us a small consulting room, but this is not yet finished.

My Assistants, Dr. Thakur and Miss Ghose and the Matron, Miss Barnabas, have done good work under trying conditions.

Dufferin Hospital.—Dr. Dodhi has been in charge for part of the year. Hyderabad The in-door maternity cases have trebled this year, largely owing to Miss Sind. Piggott's propaganda work and teaching of dais throughout Sind and to the fact that for the first time a fully trained matron has been working throughout the year.

Dufferin Hospital.—Dr. Stewart became Mrs. O'Sullivan during the Karachi. year. She reports :—

“ The work of the hospital has on the whole gone on extremely satisfactorily this year again. In both Out-patients and In-patients departments the numbers are larger than before, and the midwifery cases show again a record number. In the month of September we had 90 cases, (both normal and abnormal labours), which taxed our resources considerably, showing a clear need for extension. We have done about the same number of operations; there is always plenty of minor surgery; abdominal work varies; I still, very often find it difficult to get permission to operate in urgent cases.

The nursing arrangements are very good, and I consider that our training is well up to standard, under the very capable administration of Miss Nye, the Matron. We are now affiliated to the Bombay Presidency Nursing Association for General Training as well as Midwifery. One nurse passed the B. P. N. A. Midwifery examination this year, and three more have just sat for the November examination. Three nurses passed out after general training, one to work in Sind and two are still in hospital, doing Staff Nurses' duties.

Various repairs have been done this year, the Out-patient department especially being considerably improved. The cyclone in September did a

great deal of damage, necessitating repairs to roofs and floors all over the hospital and adding thereby to the financial burden.

The financial situation has not improved, private subscriptions are falling off. Our grants, Government and Municipal, ought to be increased to meet additional expenditure for extra work done. There is much talk of hospital extension, and many schemes are being discussed to add beds to both Maternity and General Blocks, but it seems extremely foolish to contemplate any extension whatever until the hospital finances are in a better and more stable condition.

**Bengal
Presi-
dency.
Calcutta.**

Dufferin Hospital.—Dr. Stapleton reports :—" The work of the Dufferin Hospital during 1926 has shown steady progress. There has been a considerable increase in the number of both in-and out-patients, which shows that Bengali women warmly appreciate the opportunity of being treated by doctors of their own sex and gladly use the facilities provided.

The number of maternity cases delivered in hospital has exceeded that of any previous year and sometimes the ward has been so full that several extra beds have been in use on the verandah.

If the cases continue to increase to this extent, extra provision will have to be made by the addition of a new ward, unless they are to be refused admission.

During this year the private cottages have been more in requisition than usual, but as the charges are very high, the demand is more for a cheaper form of accommodation for the families of poor patients from the mofussil.

During the second half of the year the building of the Nurses' Home Extension was taken in hand, Rs. 10,000 having been provided towards its cost by the Central Dufferin Committee. It is now nearly finished and should be ready for occupation early in the New Year. Six large rooms, in addition to two bath rooms and a lavatory, have been provided, and therefore 12 nurses can be accommodated, should additional funds be forthcoming to pay for their training.

Thanks to the response to Lady Lytton's Special Appeal for funds for equipment, the wards have now been provided with sufficient bedding and absolute necessities, such as jugs, bedpans, cups, stools, etc., and new beds have been purchased for Fraser Ward. The remainder of the fund is to be invested so that the interest will be available each year.

The hospital is still in an unsatisfactory state financially, as the Bengal Government grant has been cut down by Rs. 3,000 without any warning or satisfactory explanation, and local Indian support in the way of subscriptions is not great, although the hospital work among the poorer Indian community is steadily increasing.

We have to report, however, a very welcome gift of Rs. 5,000 from Babu Tularam Goenka to endow a bed in memory of his mother.

Dr. S. H. Commissariat, S.M.O., W.M.S., before proceeding on 5 months' leave in Europe, inspected all the Women's Hospitals and Dispensaries in the **United Provinces.** United Provinces of Agra and Oudh.

In England she attended the Fourth English Speaking Conference for Maternity and Child Welfare as delegate from the Lady Chelmsford League.

She reports the opening of three more hospitals for women in the United Provinces, at Dhampur, Jaunpur and Unao. It is hoped that all these will be under the Dufferin Fund shortly. There is a proposal to supply in the near future more medical aid to women by women doctors in the six districts in the province that have till now no Women's Hospitals.

Dufferin and Lady Lyall Hospitals, Agra, in connection with the Agra. United Provinces Government *Medical School for Women.*

Dr. Webb, Principal of the Women's Medical School, Agra, writes :—
“ The year 1926 was uneventful in the Women's Medical School. Dr. Trouton was transferred in March and Dr. Stowe appointed in her place as lecturer in Surgery ; Dr. Walters, lecturer in Pathology, left, and her place was taken by Dr. Ruth Milne, M.R.C.S., L.R.C.P., Dr. Wiseham, lecturer in Chemistry, was appointed lecturer in Medicine in place of Dr. Stowe, Miss Prem Singh, B.Sc., was appointed lecturer in chemistry. Owing to the severe epidemic of plague in Agra the State Board Examinations were held in July instead of April ; eight candidates were sent up for the qualifying examination, seven passed in July, the eighth, after re-examination in Medicine, passed in October. Junior results were not so good, as, owing to the postponement of examinations, students found it difficult to keep up such subjects as Anatomy and Physiology during the vacations.

1926 was the first occasion on which students appeared for the practical Chemistry examination, all passed.

The formation of the State Medical Faculty brings the time nearer we hope when all our students will take the 5 years' course.

Hospital work has increased, most markedly as regards abdominal operations, although the epidemic of plague nearly emptied the Hospitals for a time.

The School and Hospitals were visited by Colonel Cochrane, I.M.S., and Colonel Baird, I.M.S., as Inspectors-General, also by Dr. Scott, C.M.O., W.M.S.

The new operation theatre for the Lady Lyall Hospital given by the Council of the Countess of Dufferin's Fund, was finished and opened during the year.

The School and Hospitals still remain without electric light and fans for want of funds.

Lucknow. **Dufferin Hospital.**—Dr. Slater only took over charge at Lucknow in October, so her report chiefly deals with improvements she hopes to make in the coming year.

Cawnpore. **Dufferin Hospital.**—Dr. Keess at Cawnpore records a notable increase in the number of in-patients and in the maternity cases since the opening of the new maternity blocks.

A visit from Her Excellency Lady Irwin was much appreciated at this Hospital; the new ward is with Her Excellency's permission called the Irwin Ward.

Allahabad. **Dufferin Hospital.**—Dr. Walker reports satisfactory progress. The number of Caesarian sections was 25 this year, which shows the large amount of bone disease in this town and the need for more thorough investigation.

Benares. **Ishwari Memorial Hospital.**—At Benares the out-patient department shows a considerable increase in numbers.

The Central Dufferin Fund Committee gave a donation of Rs. 10,000 this year. With the amount, the Maternity block has been completely overhauled and adequately furnished with instruments. The floor of the Surgical and the Medical Wards have been laid with white cement. Alterations to admit more light have been made in the Surgical ward."

Punjab. **Lady Aitchison Hospital.**—Dr. Franklin reports :—"I have now been in charge of the Lady Aitchison Hospital for 3 years. When I came I was given to understand that steps would be taken to bring the present hospital up to date and make it sanitary. I regret to say that the old buildings are precisely as they were, the wards are antiquated, dark, sunless and small; the sanitary arrangements are non-existent except for two very poor latrines out in the compound and far from the wards.

The number of beds though increased to 100 is insufficient to meet the needs of Lahore and the districts. The increase in the accommodation for patients has been made, at the expense of the nurses and out-door patients, who have been turned out of the compound.

I am glad to report that a substantial building about 5 minutes walk from the Hospital has now been rented for the nurses. This has somewhat facilitated the difficulty of transport of the nurses.

Four rooms in the above building have been converted into an out-patient department.

The nurses did well in their examinations. Seven candidates entered for the United Board Examination and 6 passed. Two candidates entered and one passed C. M. B. Punjab. One dai entered for the Nurse Dais' examination.

The Hospital is indebted to Her Excellency the Countess of Reading for Rs. 2,000 with which Down's latest model operation table has been bought, also for an endowment of Rs. 15,000 for scholarships for probationer nurses.

With the Red Cross grant of Rs. 500 for the treatment of expectant mothers who cannot afford to pay for expensive drugs quite a number of patients are now under regular treatment for venereal disease and as a consequence have had normal healthy babies.

The financial position of the Hospital is somewhat improved owing to a larger annual grant from the Provincial Government, but the balance is still on the wrong side.

Dufferin Hospital.—Dr. Mucadam's work is curtailed by lack of funds ; **Central Provinces and Berar.** a larger Government grant is essential. The new Hospital building is getting on satisfactorily. **Nagpur.**

Lady Irwin and Lady Butler visited both old and new hospitals in July.

Dr. Mucadam also attends bi-weekly clinics at the branch Women's Dispensary in the city and devotes much of her spare time to the training of Health Visitors.

Lady Elgin Hospital has seen many changes in its staff during the **Jubbulpore.** year, and the work has suffered in consequence.

Lady Hardinge Hospital.—Dr. Barnes, who is inspecting Medical Officer **Berar.** for Berar Women's Hospitals, states : " This will be my last annual Report **Akola.** and I am most gratified that it has been one of progress in the entire province."

At Akola the building of the doctor's house and the maternity ward has just been completed ; the lack of accommodation for maternity cases has been acutely felt through the year.

Maternity and Child Welfare work has been begun in real earnest at Akola and Amraoti, the Women's Medical Service doctor in both places taking an important share in the supervision of the work.

A very satisfactory class of women, mostly Brahmins of sound education, is offering for nurses' training in Berar, and a great advance has been made in this work during the past few years.

At Amraoti increase in accommodation for maternity cases is urgently needed.

Raj Dufferin Hospital.—Dr. Hollway was on leave from Bettiah during **Bihar and Orissa.** the greater part of the year. Dr. Trouton acted for her and the numbers **Bettiah.** kept up well.

Gaya.

Lady Elgin Zenana Hospital.—Dr. deMenezes states that the new Operation Theatre and Sterilising Room were completed in June and thrown open to the work by the first week in July. Though it leaves much to be desired it is infinitely superior to the one in which we struggled on so long. Its full equipment would cost Rs. 4,600. We should be grateful for financial help towards it.

The old Operation Theatre has, with a few additions and alterations, been converted into a Ward to house 6 respectable non-purdah women of any caste and religion, and we have had no trouble between the different castes. This Ward is continuously filled.

The cottage wards have not only been in constant occupation but intending patients have even reserved them beforehand, the demand on them being even greater than last year.

UNITED KINGDOM BRANCH OF COUNTESS OF DUFFERIN'S FUND.

REPORT FOR THE YEAR 1926.

The annual Meeting of the United Kingdom Branch of the Dufferin Association was held at the India Office on Thursday February 25th, 1926, under the Presidency of the Dowager Marchioness of Dufferin and Ava, D.B.E., C.I., V. & A.

The Executive Committee for 1926 was appointed as follows :—

The Dowager Countess of Minto, C.I.

Major-General Sir Havelock Charles, G.C.V.O., M.D., F.R.C.S.I.

Major-General H. Hendley, G.B.E.

The Hon. Lady Lawley, G.B.E.

The Hon. Mrs. Edwin Montagu.

Miss Kate Platt, M.D., B.S.

Dame Mary Scharlieb, C.B.E., J.P., M.D., M.S.

Major-General J. Blackburne Smith, C.B., C.I.E.

Miss Jane Turnbull, C.B.E., M.D., B.S.

The Countess Birkenhead.

Miss L. M. Brooks.

The meeting was honoured by the presence of Her Excellency Lady Irwin, who remained to discuss with the Executive Committee the Memorandum which they had presented to the Central Council in July 1925 on Post-Graduate studies and arrangements in the United Kingdom for Dufferin scholars who have been educated in India.

The Dowager Marchioness of Dufferin and Ava was elected Chairman of the Executive Committee.

The Committee wish to offer their congratulations to Dame Mary Scharlieb, on the honour conferred upon her by H. M. the King in July 1926. Dame Mary was one of the original members of the U. K. Branch of the Association and of the Executive Committee since it was founded.

Arrangements have been made during the year for several medical women home on leave to pursue courses of post-graduate study. Dr. Commissariat, Dr. Greig, Dr. Slater, Dr. Mohd. Ali. Two Dufferin scholars have been in close touch with the Committee, Miss Singham reading for the F.R.C.S. Edinburgh, and Miss Alphonso, reading for the L.R.C.P., M.R.C.S., England.

The Executive Committee have not been asked to recruit for the Women's Medical Service during the year, and have been informed that the two members added to the Service in 1926 were medical women educated in India.

The accounts for the year 1926 have been audited by Mr. W. A. Sturdy of the India Office Audit Department, to whom the grateful thanks of the Committee are due.

Grateful acknowledgment of continued financial support is made to the Dowager Countess of Lytton, the Marquis of Lansdowne, Mrs. Percival Maxwell and Miss Maconchy.

The Gilchrist Educational Trustees have generously continued their annual grant of £150, to the Central Council for the medical education of women in India.

The Executive Committee wish to express their appreciation of the courtesy of the Secretary of State by which is provided the hospitality of the India Office for meetings, and most valuable assistance is given to the Association by Major-General J. Blackburne Smith and other members of the Medical Board Staff.

(Signed) HARIOT DUFFERIN & AVA,
President.

LOUIE M. BROOKS,
Hon. Secretary.

United Kingdom Branch of the Dufferin Association.

Cash Statement—January 1st to December 31st, 1926.

INCOME.			EXPENDITURE.		
	£	s. d.		£	s. d.
To Cash at Bank 31st December, 1925	327	2 5	By Clerical Assistance	50	0 0
Cash in Hand	1	15 3	Printing and Stationery	2	12 1
			Postage and Telephone	1	19 3½
To Donations and Subscriptions.			Cables	8	4
Gilchrist Educational Trust	150	0 0	Banking and Legal Charges	2	15 5
Mrs. Percival Maxwell	2	0 0	Sundries	6	0
Lady D'Arcy Osborn	2	0 0		58	1 1½
The Dowager Countess of Lytton	2	0 0			
Marquis of Lansdowne	1	0 0	By Grants and Scholarships.		
Miss Maconchy	10	6	Miss Singham	150	0 0
			Miss Alphonso	150	0 0
To Dividends and Interest.				300	0 0
TULLOCH BEQUEST.					
£100 Funding Loan	4	0 0	By Passage Money		
£1,392-18-2 India 4½%	50	1 6	Dr. Slater	145	3 1
U. K. BRANCH INVESTMENTS.			By Remittances to Central Council		
£1,874-0-3 Manchester 3%	44	19 5	Grant received from Gilchrist E. T.	150	0 0
£308 Southern Railway 5% Pref.	12	6 4	Income from Investments	54	1 6
£100 War Stock	5	0 0	Refund of Loan (Dr. Robinson)	75	0 0
				279	1 6
To Refund of Income Tax	62	5 9			
To Remittances from Central Council—for	16	2 4	By Cash at Bank 31st December, 1926	352	15 10
Travelling Expenses, Salaries and Scholarships			Cash in Hand 31st December, 1926	4	3 4½
To Refund of Loan (Dr. Robinson)	445	2 2		356	19 2½
To Sale of Stationery	75	0 0			
	5	0			
	£1,139	4 11			
				£1,139	4 11

The Cash Book, Bank Book, Vouchers and other Documents relating to the above Statement have been examined and I certify it to be correct. I have been furnished with a certificate that the securities belonging to the Association were duly held on 31st December, 1926, by Messrs. Coutts & Co., the Custodian Trustees for the United Kingdom Branch of the Dufferin Association.

20th January, 1927.

W. A. STURDY.

ANNEXURE I.

Countess of Dufferin's Fund.

The Annual Account and the Statement of Investments will be found in Annexures I & II to this Chapter.

2. The interest from investments has amounted to about Rs. 43,000 inclusive of a sum of over Rs. 2,000 realised as interest on Rs. 50,000 placed on Fixed Deposit last year. The contributions from the various Funds towards expenses of the Central Office have amounted to Rs. 44,800. Two donations of Rs. 500 each have been received from Their Excellencies during the year—one from the Earl and Countess of Reading and one from Lord and Lady Irwin. The usual grant from the Gilchrist Educational Trust has also been received during the year. The miscellaneous receipts have amounted to over Rs. 800 inclusive of over Rs. 500 received on account of refunds of scholarships. Nothing, however, has been received from the Bhukailash Court of Wards during the year in repayment of the loan to that Estate.

3. On the expenditure side, the Central Office expenses have amounted to about Rs. 50,000; Scholarships, Prizes and Medals to about Rs. 6,000 inclusive of Council Scholarships amounting to over Rs. 5,700. The details of the scholarships awarded from Trust Funds are given in the statement appended to this account wherefrom it will be seen that the Fawcett and the Petit Scholarships have amounted to over Rs. 700 and Rs. 150 respectively, the Muir Scholarships to about Rs. 400 and the Gilchrist Scholarships to about Rs. 1,500.

The Queen Empress Medal has not been awarded this year.

4. The expenditure in Governors' Provinces has amounted to Rs. 54,000 and in areas other than Governors' Provinces to about Rs. 14,500.

5. The important feature of this year's accounts is due to the decision of the Executive Committee that the Provident Fund Account in respect of members of the Central Office should be maintained in the Provident Fund Account of the Women's Medical Service. As a result of this decision, the liability of the Dufferin Fund of over Rs. 3,500 at the close of the year 1925 as shown in the opening balance of this year and the Association's contribution of over Rs. 400 payable in 1926 as also the interest on accrued balances amounting to over Rs. 100 were transferred during the year to the Women's Medical Service Provident Fund Account. From this year onwards the only items in connection with Provident Fund which will appear in this account will be the contribution to the Provident Fund and the interest on accrued balances.

6. The important features of the closing balance are :—

- (i) An increase of nearly Rs. 40,000 in the Assets during the year and
- (ii) A reduction in the Cash balance from about Rs. 86,000 to about Rs. 30,000.

ANNEXURE I.

*Statement of Investments of the Countess of Dufferin's Fund on
31st December, 1926.*

Assets.	Face Value.	Cost.	Market Value.
	Rs. A. P.	Rs. A. P.	Rs. A. P.
1. 3½ p. c. Government of India Loan (1865)	25,000 0 0		
2. 3½ p. c. Government of India Loan (1900-01)	55,000 0 0	53,194 10 8	42,900 0 0
3. 6 p. c. Government of India Bonds (1930)	3,00,000 0 0	3,00,000 0 0	3,21,000 0 0
4. 6 p. c. Government of India Loan (1931)	60,000 0 0	60,000 0 0	64,800 0 0
5. 6½ p. c. Government of Bombay Trust Funds	20,600 0 0		
6. 6½ p. c. Government of Bombay Loan	70,600 0 0	70,719 0 4	80,484 0 0
7. 5 p. c. Government of India Loan (1945-55)	50,000 0 0	48,000 0 0	54,000 0 0
8. 5 p. c. Government of India Loan (1945-55)	36,700 0 0	39,928 1 0	39,636 0 0
9. Imperial Bank of India (Madras Bank) Shares—			
22 Fully paid up shares of Rs. 500 each	11,000 0 0		
44 Shares paid Rs. 125 each	5,500 0 0	16,500 0 0	51,546 0 0
	5,88,800 0 0	5,88,341 12 0	6 54,366 0 0
10. Loan to Bhukailash Court of Wards Estate	93,300 0 0	93,300 0 0	
11. Sterling Investments (Tulloch Bequest)—			
India 4½ p. c. Stock 1950-55	£ s. d. 1,390 18 2		
Funding Loan 4 p. c.	100 0 0		
	1,490 18 2		
At ls. 4d.	22,363 10 0	22,363 10 0	
TOTAL	7,04,463 10 0	7,04,005 6 0	

*Statement showing reconciliation of the Opening and Closing
Balances of Trust Accounts.*

Trusts.	Opening balance.	Interest received.	Total.	Expenditure.	Balance.
1. Henry Fawcett .	12,778 11 11	365 0 0	13,143 11 11	720 0 0	12,423 11 11
2. Sir Dinshaw Manekji Petit .	7,771 6 8	365 0 0	8,136 6 8	150 0 0	7,986 6 8
3. Sir John Muir .	13,403 12 3	609 0 0	14,012 12 3	390 0 0	13,622 12 3
4. Gilchrist Trust .	2,458 0 11	*1,997 0 0	4,455 0 11	1,410 0 0	3,045 0 11
TOTALS .	36,411 15 9	3,336 0 0	39,747 15 9	2,670 0 0	37,077 15 9

* This is grant from Gilchrist Educational Trust and not interest.

ANNEX

Annual Account of the Countess of Dufferin's Fund Income.

Items.	Amount.		TOTAL.	
	Rs.	A. P.	Rs.	A. P.
1. BALANCE ON 1ST JANUARY, 1926—				
Investments	5,48,413	11 0		
Loans	93,300	0 0		
Sterling Investments	22,363	10 0		
Deposit with Imperial Bank	50,000	0 0		
Cash	85,681	7 9		
	7,99,758	12 9		
<i>Less—</i>				
	Rs.	A. P.		
Trust Funds	30,411	15 9		
Provident Fund	2,149	3 0		
Liability to Women's Medical Service on account of Provident Fund	1,380	0 0	30,941	2 9
			7,59,817	10 0
2. INTEREST REALISED—				
Gross Receipts	40,545	7 11		
<i>Less—</i>				
			1,339	0 0
Transferred to Trust Funds	39,206	7 11		
Interest on Temporary Investments	2,125	0 0		
			41,331	7 11
3. CONTRIBUTIONS—				
(a) From the Women's Medical Service, the Victoria Memorial Scholarships Fund and the Lady Chelmsford All India League on account of the share of cost of Central Office expenditure	44,800	0 0		
(b) From Their Excellencies	1,000	0 0		
			45,800	0 0
4. MISCELLANEOUS—				
(a) Refund of Scholarships	558	4 0		
(b) Recovery of rent and telephone charges	187	15 0		
(c) Other Items	107	8 0	853	11 0
TOTAL	...		8,47,802	12 11

CAWNPORE:
4th March 1927.

URE II.

(including Central Office), 1926.

Expenditure.

Items.	Amount.		TOTAL.	
	Rs.	A. P.	Rs.	A. P.
1. CENTRAL OFFICE EXPENSES	...		49,642	0 10
2. SCHOLARSHIPS, PRIZES AND MEDALS—				
Council Scholarships	5,629	0 0		
Lady Dufferin Prize	45	0 0		
Viceroy's Medals	42	12 0	5,715	12 0
3. EXPENDITURE IN OTHER THAN GOVERNORS' PROVINCES—				
(a) North-West Frontier Province	1,200	0 0		
(b) Baluchistan	1,704	0 0		
(c) Delhi	11,500	0 0	14,404	0 0
4. GRANTS-IN-AID IN GOVERNORS' PROVINCES—				
(a) United Provinces	16,000	0 0		
(b) Punjab	6,000	0 0		
(c) Central Provinces	6,500	0 0		
(d) Berar	11,500	0 0		
(e) Assam	4,000	0 0		
(f) Bengal	10,000	0 0	54,000	0 0
5. MISCELLANEOUS—				
(a) Association's contribution in respect of members of Central Office (excluding Dr. Scott) transferred to Women's Medical Service Provident Fund Account	434	0 0		
(b) Interest on accrued balances transferred to Women's Medical Service Provident Fund Account	109	0 7		
(c) Allowance to Dr. M. A. Murphy	1,820	0 0		
(d) Bank charges	56	14 0	2,419	14 7
6. CLOSING BALANCE—	Rs.	A. P.		
Investments	5,88,341	12 0	1,26,181	11 5
Loans	93,300	0 0		
Sterling Investments	22,363	10 0		
Deposit with Imperial Bank	25,000	0 0		
Cash	29,693	11 3		
	7,58,699	1 3		
Less—				
Trust Funds	37,077	15 9	7,31,621	1 6
	TOTAL	...	8,47,802	12 11

Examined and found correct.

PRICE, WATERHOUSE, PEAT & Co.,
Chartered Accountants,
AUDITORS.

M. F. GAUNTLETT,
Honorary Treasurer.

WOMEN'S MEDICAL SERVICE.

In Annexure III to this Chapter are exhibited the Annual Accounts and the Statement of Investments for the year 1926.

2. It will be seen that the main source of income is the contribution from the Government of India which amounts to Rs. 3,70,000. The interest amounts to over Rs. 30,000 while miscellaneous receipts have amounted to about Rs. 8,400. This includes a sum of over Rs. 4,000 received from the Government of Madras towards Provident Fund charges of Dr. Mary O'Brien Beadon and a sum of about Rs. 800 received from the Government of the United Provinces towards Provident Fund charges of Dr. S. H. Commissariat.

3. On the expenditure side, the share of the Central Office expenses paid from these accounts amounted to Rs. 25,600. The expenditure on the pay and allowances of the Senior Branch of the Women's Medical Service amounted to about Rs. 2,92,000 while the expenditure on the Training Reserve amounted to about Rs. 12,600. A sum of Rs. 12,000 was spent on the Junior Women's Medical Service. The miscellaneous expenditure during the year amounted to under Rs. 200.

4. An important feature of the account is the expenditure for the first time on the cost of passages granted to members on service which amounts to just under Rs. 12,000.

5. In order to give a clearer idea of the liabilities of the Women's Medical Service, the Executive Committee adopted a new procedure with regard to the transactions of the Provident Fund from the 1st July 1926. A separate account for the Fund has been maintained with effect from that date, the total liabilities to the end of June 1926 being provided for by transfer from the fund of the Women's Medical Service to the Account. Securities of the face value of three lacs of rupees bearing interest at 5 per cent per annum and over Rs. 33,000 in cash were thus transferred to the Provident Fund Account. As the actual cost of the securities transferred was only Rs. 2,88,000, the balance of Rs. 12,000 has still to be transferred to the Provident Fund Account. The amount has consequently been shown as a liability of the Service as will be seen from the closing balance. The transfer of the securities referred to above will result in a reduction of the amount of interest receipts in this account by about Rs. 15,000 per annum, but on the other hand, there will be a compensatory saving in the amount hitherto being charged as interest on fund balances. As a result of this change of procedure, the only item in connection with the Provident Fund Accounts which will appear in the accounts of the Women's Medical Service will be the contribution to the Provident Fund and any payment which may be due to supplement the interest realised from investments to meet the interest due to subscribers.

A sum of Rs. 4,438-6-4 has thus to be transferred to the Provident Fund Account on account of interest short realised by that account.

6. The net result of the transactions of the year was a reduction of cash balance from about Rs. 1,55,000 to about Rs. 77,000.

7. The important features of the statement of Assets are :—

- (1) An investment of about a lac of rupees in the purchase of Government Securities and
- (2) The transfer of the Securities of the face value of three lacs to the Women's Medical Service Provident Fund Account as already remarked in paragraph 5 above.

ANNEXURE III.

Statement of Investments of the Women's Medical Service
as on 31st December 1926.

Assets.	Face Value.			Cost.			Market Value.
	Rs.	A.	P.	Rs.	A.	P.	Rs.
1. 3½ per cent. Government of India Loan (1865) . . .	2,00,000	0	0	1,89,574	3	9	1,56,000
2. 4 per cent. Calcutta Municipal Debentures . . .	57,000	0	0	54,221	7	4	49,590
3. 5½ per cent. Government of India War Bonds, 1928. .	7,000	0	0	7,000	0	0	7,490
4. 6 " " " " 1930. .	8,000	0	0	8,277	8	0	8,560
5. 6 " " " " 1930. .	8,000	0	0	8,000	0	0	8,560
6. 6 " " " Loan (1931) . .	40,000	0	0	40,000	0	0	43,200
7. 5 " " " " (1945-55) . .	1,50,000	0	0	1,48,500	0	0	1,62,000
8. 5 " " " " (1945-55) . .	90,500	0	0	99,970	5	1	97,740
TOTAL .	5,60,500	0	0	5,55,543	8	2	5,33,140

ANNEX
Women's Medi
Statement of Income and Ex

Income.

Items.	Amount.	Total.
	Rs. A. P.	Rs. A. P.
1. BALANCE ON 1ST JANUARY, 1926—		
Investments	7,43,573 3 1	
Cash	1,54,429 14 6	
Due by Dufferin Fund	1,380 0 0	
<i>Less—</i>	8,99,383 1 7	
Provident Fund	2,98,564 14 9	6,00,818 2 10
2. INTEREST ON INVESTMENTS . . . . .	.....	25,849 1. 8
3. CONTRIBUTION FROM THE GOVERNMENT OF INDIA. . . . .	.....	3,70,000 0 0
4. MISCELLANEOUS—		
(a) Contribution from the Government of the United Provinces towards provident fund charges of Dr. S. H. Commissariat	780 0 0	
(b) Contribution from the Madras Government towards provident fund charges of Dr. O'Brien Beadon	4,136 7 0	
(c) Amount received from the Accountant General, Madras, towards pay of a member of the leave reserve remained unemployed during Dr. Beadon's leave	550 0 0	
(d) Refund of loan from Miss Griffin	1,234 2 0	
(e) Refund of Miss Basil's pay	48 3 5	
(f) Refund of loan from Dr. Robinson	999 6 9	
(g) Other items	600 4 0	8,348 7 2
Total Rs. . . . .	.....	10,05,015 11 8

CAWNPORE :

4th March 1927.

URE IV.

cal Service.

penditure for the year 1926.

Expenditure.

Items.	Amount.	Total.
	Rs. A. P.	Rs. A. P.
1. CONTRIBUTION TO THE COUNTIES OF DUFFERIN'S FUND ON ACCOUNT OF CENTRAL OFFICE EXPENSES . . . . .	.....	25,600 0 0
2. PAY AND ALLOWANCES (SENIOR BRANCH)—		
(a) Pay	2,49,544 12 0	
(b) Duty Allowances	2,286 12 0	
(c) Leave Allowances	35,201 12 0	
(d) Travelling Allowances	4,812 7 3	2,91,839 11 3
3. TRAINING RESERVE (WOMEN'S MEDICAL SERVICE)—		
(a) Pay	12,464 14 5	
(b) Travelling Allowances	103 0 0	12,567 14 5
4. JUNIOR WOMEN'S MEDICAL SERVICE—		
(a) Pay and Personal Allowances	11,538 14 0	
(b) Leave Allowances	645 0 0	12,183 14 0
5. COST OF PASSAGES . . . . .	.....	11,926 0 6
6. AMOUNT TRANSFERRED TO PROVIDENT FUND ACCOUNT—		
Contribution	37,566 1 0	
Less not paid in final payment	2,956 12 0	34,609 5 0
7. MISCELLANEOUS . . . . .	.....	194 9 0
8. BALANCE ON 31ST DECEMBER 1926—		
Investments (as per Schedule)	5,55,543 8 2	
Cash	76,989 3 8	
Less—	6,32,532 11 10	
Amount to be transferred to the Women's Medical Service Provident Fund Account	16,438 6 4	6,16,094 5 6
Total Rs. . . . .	.....	10,05,015 11 8

Examined and found correct.

PRICE, WATERHOUSE, PEAT & Co.,

Chartered Accountants,

AUDITORS.

M. F. GAUNTLETT,

Honorary Treasurer.

ANNEXURE V.

Women's Medical Service and Central Office Provident Fund Account.

This is the first time that the Provident Fund transactions of the Women's Medical Service and of the Central Office have been separately shown from the main account in the Annual Report of the National Association.

2. To obtain a clearer idea of the liabilities of the Women's Medical Service, the Executive Committee decided to open a separate account for the Provident Fund and the transactions connected therewith with effect from the 1st July 1926. As a result of this decision, securities of the face value of rupees three lacs and cash to an extent of over Rs. 33,000 have been received from the Women's Medical Service on account of the total liability to end of June 1926.

3. At a later date it was decided to amalgamate in this account the provident fund transactions of three members of the Clerical Staff of the Central Office.

4. During the year, the subscriptions from members has amounted to about Rs. 39,500 while repayments of advances amount to Rs. 3,750. The Council Contribution has amounted to Rs. 38,000.

5. The advances to members have amounted to Rs. 1,500 while final payments to about Rs. 3,300. A sum of about Rs. 3,000 was repaid to the Women's Medical Service on account of Council Contribution remaining unpaid to those members who left service without serving the period required under rules.

6. An important point which needs mention is that the liability on account of interest on accrued balances has to be met as far as possible from the amount of interest derived from investments. As, however, the Women's Medical Service would be responsible for any deficit if the interest realised by the Provident Fund were insufficient to meet the interest due to subscribers, it has been decided by the Executive Committee that in the event of the interest realised from the Provident Fund investments being more than sufficient to pay the total interest due to the individual accounts, the surplus should be paid back to the Women's Medical Service. As the transfer of securities was effected in the second half-year, the interest from investments for half the year has not been sufficient to meet the total liability for interest on accrued balances. Thus a sum of about Rs. 4,500 has to be received from the Women's Medical Service to meet the total interest due to subscribers. This circumstance is not likely to arise in future years when more interest will be earned as a result of further investments. A sum of about Rs. 60,000 has already been invested during the second half-year.

7. The total liability on account of Provident Fund inclusive of interest on accrued balances amounts to over Rs. 3,87,500.

Statement showing Investments of the Women's Medical Service, Provident Fund Account.

Assets.	Face Value.	Cost.	Market Value.
	Rs. A. P.	Rs. A. P.	Rs. A. P.
1. 5 per cent Government of India Loan 1945-55	3,00,000 0 0	2,88,000 0 0	3,24,000 0 0
2. 5 per cent Government of India Loan 1945-55	54,300 0 0	59,982 4 8	58,644 0 0
TOTAL .	3,54,300 0 0	3,47,982 4 8	3,82,644 0 0

British India.																								
3.	Lady Willington, Madras**	.	.	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
4.	Royapuram, Madras	.	.	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
5.	Vellore**	.	.	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
6.	B. J. Medical School, Ahmedabad	.	.	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
7.	B. J. Medical School, Poona	.	.	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
8.	Hyderabad, Sind	.	.	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
9.	Campbell Medical School, Calcutta	.	.	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
10.	Dacca	.	.	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
11.	Women's Medical School, Agra**	.	.	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
12.	Ludhiana**	.	.	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
13.	Cuttack	.	.	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..

ANNEX

Particulars of Hospitals under officers

Name and location of hospital with details as to whether owned by Government or a Local Body or a private institution. Unless otherwise stated Provincial Branches of C. D. F. are the owners.	STAFF.									
	Number of beds.	Women's Medical Service.	Junior W. M. S., or W. M. S. Training Reserve.	Assistant Surgeons.	Sub-Assistant Surgeons.	Matrons, Nursing Superintendents or Sisters.	STAFF NURSES.		PROBATIONER NURSES.	
							Indians.	Others.	Indians.	Others.
1	2	3	4	5	6	7	8	9	10	11
SIMLA.										
A.—HOSPITALS IN AREAS DIRECTLY										
Lady Reading Hospital for Women and Children Private Institution, aided by Municipality and Punjab Government.	75	1	1 J. W. M. S. 1 T. R.	1	..	1 Nursing Supdt., 2 Sisters	8	—	9	—
DELHI.										
Lady Hardinge College Hospital supported by Government of India with grants from Provincial Governments.	200	8	1	7	—	7	24	—	40	—
Victoria Zenana Hospital, Private aided.	60	1	..	1	—	1 Matron 1 Sister	4	1	10	—
BALUCHISTAN.										
Lady Sandeman Hospital, Quetta.	30	1	—	1	—	—	3	—	—	—
Lady Dufferin Zenana Hospital, Fort Sandeman.	8	—	1	—	—	—	—	—	—	—
McIvor Female Dispensary, Sibi.	10	..	1	..	..	..	1	—	..	..
NORTH-WEST FRONTIER PROVINCE.										
Dera Ismail Khan Municipal Zenana Hospital.	21	1	..	..	1	1	1	..	1	..
MADRAS.										
B.—HOSPITALS IN GOVERNORS' PROVINCES										
Government Victoria Hospital for Women, Tirunelveli, Madras, owned by Government.	82	1	1	2	2	1 Matron.	1	4	7	7
UNITED PROVINCES.										
Agra Women's Medical School, supported by U. P. Govt.	126	2	1	3	7	2	—	3	—	14
MADRAS.										
C.—HOSPITALS IN GOVERNORS' PROVINCES										
Victoria Hospital for Women and Children, Vizagapatnam.	28	1	..	1	..	1	2	1	5	3

URE VII. of the Women's Medical Service.

WORK DONE IN HOSPITAL.											REMARKS.	
Number of new In-patients.	Number of new Out-patients.	Total attendance of Out-patients (old and new).	GYNAECOLOGICAL CASES.		MIDWIFERY.			OPERATIONS.				
			Indoor.	Outdoor.	Abortions.	Normal labour.	Abnormal labour.	Abdominal.	Under General Anaesthesia.	Total.		
12	13	14	15	16	17	18	19	20	21	22	23	
UNDER THE GOVERNMENT OF INDIA.												
1,058	4,777	20,051	127	1,017	17	87	62	47	453	872		
3,867	11,670	23,423	1,471	3,133	45	193	145	193	1,600	2,290	The officers of the W. M. S. are only part time workers in the hospital.	
1,906	19,508	51,000	461	3,478	47	242	116	110	605	800		
—	—	—	—	—	—	—	—	—	—	—		
287	6,114	10,070	78	475	1	6	4	—	3	3		
249	4,970	19,675	24	349	7	18	2	—	8	64		
513	6,913	15,989	228	3,788	5	157	31	6	200	581		
UNDER THE CONTROL OF THE LOCAL GOVERNMENTS.												
3,329	15,057	41,835	608	3,885	119	1,286	169	91	555	1,082		
2,725	14,143	27,549	467	2,045	204	504	100	141	808	949		
UNDER LOCAL DUFFERIN FUND OR PRIVATE INSTITUTIONS.												
926	22,174	72,770	326	2,940	6	110	30	26	301	828		

Particulars of Hospitals under officers

Name and location of hospital with details as to whether owned by Government or a Local Body or a private institution. Unless otherwise stated Provincial Branches, C.D.F. are the owners.	STAFF.									
	Number of beds.	Women's Medical Service.	Junior W. M. S., or W. M. S. Training Reserve.	Assistant Surgeons.	Sub-Assistant Surgeons.	Matrons, Nursing Superintendents or Sisters.	STAFF NURSES.		PROBATIONER NURSES.	
							Indians.	Others.	Indians.	Others.
1	2	3	4	5	6	7	8	9	10	11
BOMBAY.										
Women's Hospital, Hyderabad (Sind).	36	1	1	..	..	1 Matron.	2	..	..	..
Lady Dufferin Hospital, Karachi has Government and Municipal Grants but is largely run on private donations.	80	1	—	—	2	1 Matron 4 Sisters.	3	—	10	8
Dufferin Hospital, Shikarpur.	22	1	..	1	1	1	..	7 Dals	..	2 Dals
S. M. V. Hospital for Women and Children, Surat.	30	1	1	—	—	1 Matron.	2	..	5	..
BENGAL.										
Dufferin Victoria Hospital, Calcutta.	103	2	—	2	—	1 Matron 8 Sisters	2	—	19	8 Pupil midwives
UNITED PROVINCES.										
Dufferin Hospital, Allahabad	44	1	—	1	—	1	4	1	4	—
Ishwari Memorial Hospital, Benares.	56	1	—	—	1	1 Matron 2 Sisters	2	—	4	—
Dufferin Hospital, Cawnpore	42	1	—	1	..	1 Matron 1 Sister	1 Nurse 4 Dals	—	4	—
Dufferin Hospital, Lucknow	40	1	—	1	1	1	—	1	..	5
PUNJAB.										
Lady Altbison Hospital, Lahore.	100	1	1 J. W. M. S. 1 Training Reserve.	1	—	1 Matron 2 Sisters.	4	5	5	7
Women's Hospital, Lyallpur owned by District Board.	16	..	1 J. W. M. S.	..	..	1 Matron	..	..	4	..
Women's Department of Civil Hospital, Rawalpindi Municipality.	16	..	1 J. W. M. S.	1	..	1	1	..	..	..
BIHAR AND ORISSA.										
Raj Dufferin Hospital, Bettiah.	47	1	—	—	1	1	2	—	13	..
Lady Elgin Zenana Hospital, Gaya.	60	1	1	..	..	1	1	..	5	..

of the Women's Medical Service.

WORK DONE IN HOSPITAL.											REMARKS.
Number of new In-patients.	Number of new Out-patients.	Total attendance of Out-patients (old and new).	GYNAECOLOGICAL CASES.		MIDWIFERY.			OPERATIONS.			
			Indoor.	Out-door.	Abortions.	Normal labour.	Abnormal labour.	Abdominal.	Under General Anaesthesia.	Total.	
12	13	14	15	16	17	18	19	20	21	22	23
760	7,803	44,701	154	1,647	157	177	85	3	136	370	
2,183	14,567	13,750	332	2,333	47	554	77	53	459	512	
1,205	9,264	28,857	281	3,199	46	393	53	6	159	400	
760	5,578	26,405	175	1,569	14	191	25	9	122	131	
2,449	5,632	12,240	853	3,246	67	464	76	113	903	1,016	
822	6,465	15,313	188	1,586	9	93	76	47	343	582	
1,027	12,033	33,697	183	2,577	33	145	91	43	419	1,674	
914	10,146	32,207	232	2,020	45	90	56	62	285	586	
727	7, 26	27,494	128	1,915	38	130	67	16	140	273	
2,004	7,596	18,680	450	3,077	62	90	97	133	1,036	1,261	
534	8,322	6,506	213	2,193	13	60	14	6	118	124	
679	11,960	25,078	162	2,332	11	44	14	4	63	67	
1,680	20,003	44,183	106	729	4	65	18	15	295	310	
697	6,987	24,765	224	1,027	12	13	49	65	449	1,011	

Particulars of Hospitals under officers

Name and location of hospital, with details as to whether owned by Government or a Local Body or a private institution. Unless otherwise stated Provincial Branches, C. D. F. are the owners.	STAFF.									
	Number of beds.	Women's Medical Service.	Junior W. M. S., or W. M. S. Training Reserve.	Assistant Surgeons.	Sub-Assistant Surgeons.	Matrons, Nursing Superintendents or Sisters.	STAFF NURSES.		PROBATIONER NURSES.	
							Indians.	Others.	Indians.	Others.
1	2	3	4	5	6	7	8	9	10	11
CENTRAL PROVINCES AND BERAR.										
Lady Elgin Hospital, Jubbulpore.	18	1	..	1	..	1	2	..	2	2
Crump Children's Dispensary, owned by Government.	..	..	..	..	..	..	1	..	..	..
Dufferin Hospital, Nagpur .	36	1	1	1	—	1	2	—	12	—
Lady Hardinge Hospital, Akola.	20	1	—	1	—	1	2 and 1 Compounder	—	7 & 1 pupil compounder	—
Sai Bai Mote Female Hospital, Shergaon, Local Fund.	18	..	1 J. W. M. S.	1	1	—	6	..	..	..
Dufferin Hospital, Amraoti.	22	1	—	1	—	1	3 and 1 compounder	—	4	..

of the Women's Medical Service.

WORK DONE IN HOSPITAL.											REMARKS.
Number of new In-patients.	Number of new Out-patients.	Total attendance of Out-patients, (old and new).	GYNAECOLOGICAL CASES.		MIDWIFERY.			OPERATIONS.			
			Indoor.	Out-door.	Abortions.	Normal labour.	Abnormal labour.	Abdominal.	Under General Anaesthesia.	Total.	
12	13	14	15	16	17	18	19	20	21	22	23
484	3,130	11,579	98	530	101	29	39	5	145	250	
..	..	..	..	..	..	..	..	..	..	..	
1,025	8,790	27,761	175	1,403	19	158	54	17	314	895	
745	4,334	16,508	172	1,080	17	100	65	4	75	190	
420	9,828	47,547	115	597	12	67	12	9	112	379	
608	9,510	36,286	102	1,101	16	122	50	2	57	383	

ANNEXURE VIII.

INDIAN STATES.

Details regarding Hospitals for Women for the calendar year 1926.

Name and Location of Hospital.	Name of Medical Woman in Charge.	By whom supported.	No. of beds.	No. of In-patients.	No. of new Out-patients.	Total attendance of Out-patients, old and new.
1. HYDERABAD STATE.						
Gulburga—						
Rani Chellam Jankibai	Miss S. Keskar . . . .	....	4	63	2,132	5,169
Hyderabad—						
Victoria Zenana	Miss N. Evans L.R. C. P. & S. (Ed.)	....	120	41,135	19,300	41,237
Female Department, Doodboul . Dispensary.	Mrs. Partridge . . . .	....	Nil	Nil	8,084	30,326
Police	Mrs. Ratan . . . .	....	3	8	2,909	6,052
Warangal—						
Female Department, Hanamkonda Civil.	Mrs. Davis . . . .	....	1	6	2,386	6,625
Suburban	Mrs. Gopal . . . .	....	5	12	9,505	22,369
Allabad	Mrs. H. Cornelius . . . .	....	Nil	Nil	7,039	21,209
Ma shobnagar	Mrs. L. M. Reddy . . . .	....	2	17	4,202	10,649
2. MYS RE STATE.						
1. Bangalore—						
Lady Curzon Hospital, Bangalore	Residency Surgeon, assisted by 2 Lady Assistant Sur- geons— 1. Miss De Santos. 2. Miss Collins.	Government of India.	120	2,542	28,077	60,013
Hajee Sir Ismail Salt, Gosha Hos- pital, Bangalore.	Miss M. E. McMur- ray, L.R.C.P. & S. (Ed.), assisted by Miss M. de Souza, S.A.S.	Do.	20	329	4,942	24,894
2. Maternity Hospital	Miss C. Albuquerque, M.R.C.S., L.R.C.P., L.M.	Government .	48	1,694	18,414	38,869
3. Victoria Hospital	Mrs. Perriton, M.D.	Do.	54	949	10,835	27,287
4. Maternity Hospital, Kolar Gold Fields.	Mrs. Fernandez, M.B., B.S.	Government and Sanitary Bd., Kolar Gold Fields.	22	958	21,002	38,800
5. Female Department, District Hos- pital, Kolar.	Mrs. A. C. Murphy, S.A.S.	Local and Muni- cipal Bodies.	4	67	13,800	21,769

Details regarding Hospitals for Women for the calendar year 1926— *continued.*

Name and Location of Hospital.	Name of Medical Woman in Charge.	By whom supported.	No. of beds.	No. of In-patients.	No. of new Out-patients.	Total attendance of Out-patients, old and new.
2. MYSORE STATE—<i>contd.</i>						
6. Female Department, District Hospital, Tumkur.	Miss Smith, Lady Apothecary.	Local and Municipal Bodies.	18	194	8,185	18,373
7. Vain Vilas Hospital, Mysore.	Mrs. M. Whale, M.B., B.S.	Government and District Board.	36	1,211	14,143	14,258
8. Female Department, District Hospital, Hassan.	Mrs. Uchigankar, L.M.S.	Local and Municipal Board.	5	164	13,235	34,164
9. Krishna, Rajendra Hospital, Mysore.	1 Mrs. M. Miles, M.B., B.S., Assistant Surgeon. 2. Miss Grace Titus, Sub-Assistant Surgeon.	The Government.	40	865	14,389	49,603
10. Female Dispensary, Chikballapur.	Miss Ivy Samuels, Sub-Assistant Surgeon.	Municipal and Local Funds.	2	8	10,869	18,656
11. Female Dispensary, Chitamani.	Mrs. Amba Bai, Sub-Assistant Surgeon.	Do.	2	11	7,899	17,782
12. Maternity, Hospital, Saklespur.	Miss Jouquine, Sub-Assistant Surgeon.	Do.	6	29	6,902	15,568
13. Female Dispensary, Hole-Narsipur.	Miss Tousaint, Sub-Assistant Surgeon.	Do.	..	..	3,475	8,810
14. Female District Hospital, Shimoga.	Miss J. Lobo, M.B., B.S.	Do.	12	320	11,975	29,113
15. Female Dispensary, Saga., Shimoga District.	Miss R. K. Andrews, Sub-Assistant Surgeon.	Do.	3	21	7,774	17,987
16. Female Department, District Hospital, Chikmagalur.	Miss A. G. Allen, L.M.S.	Do.	15	236	16,030	36,703
17. Female Dispensary, Tarikere, Kadur District.	Mrs. A. F. James, Lady Apothecary.	Do.	2	10	6,658	1,174
3. CENTRAL INDIA STATES.						
Bhopal—						
Lady Lansdowne Hospital.	Miss G. Carleton, M.B., Ch.B. Edin.	State.	40	742	6,842	19,400
Asifa Female Dispensary.	Mrs. Bismilla Khanam, S.A.S.	H. H. the Nawab Sultan Jahan Begum Sahiba, C.I., G.C.S.I., G.C.I.E., C.B.E.	..	..	3,049	11,950
Rewa—						
Zenana.	Mrs. Dadina, L.R.C.P. & S. (Edin.).	Rewa State.	8	14	4,842	20,615
4. RAJPUTANA STATES.						
Alwar—						
Lady Dufferin.	Dr. Sugna Bai.	State.	60	128	28,454	40,423
Bharatpur—						
Sri Dadiji Sahiba Daryal Kaur for Women.	Miss Poona Bai.	State.	24	219	8,280	8,056

Details regarding Hospitals for Women for the calendar year 1926— continued.

Name and Location of Hospital.	Name of Medical Woman in Charge.	By whom supported.	No. of beds.	No. of In-patients.	No. of new Out-patients.	Total attendance of Out-patients, old and new.
4. RAJPUTANA STATES—contd.						
Bikanir—						
Zenana	Dr. D. Fairbairn, M.B., C.M., M.R.C.S., L.R.C.P., L.M., Rot.	H. H. the Maharaja.	24	56	5,981	19,347
Beawar—						
Female Hospital	Miss Houlton	Municipality and District Board.	15	103	8,843	20,476
Branch Dispensary, Sayan	..	..	..	..		
Jaipur—						
Mayo	Dr. Prem Pyari	Jaipur Darbar	39	1,387	24,827	53,227
Jodhpur—						
Jaswant Female	Mrs. Tarleton	Raj Marwar	36	40	13,359	45,445
Kishangarh—						
General	..	State	6	55	6,070	18,140
Kotah—						
Victoria	Mrs. Newton David, L.R.C.P. & S. (Ed.)	H. H. the Maharao.	27	200	9,803	27,347
Tonk—						
Walter Female	Dr. K. Reed	State	20	199	11,597	11,647
Udaipur—						
Walter Zenana	Miss B. D. Dube	H. H. the Maharana Sahib Bahadur.	24	52	396	846
5. BARODA STATE.						
Baroda—						
Jamnabai Dispensary	Dr. Mrs. E. Aquino.	Baroda State	2	312	31,859	1,48,190
State General	{ Dr. Maya Das, M.D., Philadelphia }	Baroda State	16	326	..	..
Patan—						
Dayanabhai Maternity	Dr. Bana, M.B.I.B.S.	Baroda State	12	2,116	8,870	37,799
6. KASHMIR STATE.						
Jammu—						
King Edward Memorial Zenana	Dr. R. Gubbay, M.B., B.S.	Kashmir Darbar	10	71	5,403	18,404
Srinagar—						
Diamond Jubilee Zenana	Dr. E. Hartley, M.B., Ch. B., D.P.H.	Kashmir State	50	1,088	12,335	28,317

Details regarding Hospitals for Women for the calendar year 1926— *continued.*

Name and Location of Hospital.	Name of Medical Woman in Charge.	By whom supported.	No. of beds.	No. of In-patients.	No. of new Out-patients.	Total attendance of Out-patients, old and new.
7. GWALIOR STATE.						
Janakganj—						
Branch Dispensary	Miss M. Bede Pillai, S.A.S.	State	..	..	7,662	29,273
Jashkar—						
J. A. for Women and Children and Female Outdoor Dispensary.	{ Miss P. Datal, L.M. & S. Mrs. Shivpuri and Mrs. V. Kshirsagar, Asst. Doctor.	{ State	70	1,267	16,247	49,642
Ujjain—						
Civil for Women	Post Vacant	State	18	30	31,178	95,130
8. MADRAS STATES.						
Cochin . . . . .	....	....	..	..	..	..
Muttancherry—						
Women's	Mrs. M. E. Kohlhoff, L. N. (Dub.).	Cochin Govern- ment.	62	1,491	22,862	43,772
Trichur—						
Maternity	Miss G. M. D'Souza M.R.C.S. (Eng.), L.R.C.P. (Lond.)	Cochin Govern- ment.	68	1,650	24,362	38,723
Ernakulam—						
General	{ Mrs. R. Salem Mrs. M. Madhavi Ammah. Mrs. C. V. Sanka- rambal.	{ Do.	64	1,324	20,652	50,118
Travancore—						
Alleppey—						
District Alleppey	Miss E. Sebastian, S.A.S.	Travancore Gov- ernment.	20	571	26,445	57,596
Kottayam—						
District	Mrs. C. Jacob (Apothecary).	Do.	14	381	24,571	56,778
Quilon—						
Victoria Jubilee	Miss E. Samuel, M.B., B.S., (on study leave). Miss I. Gomez.	Do.	41	2,291	32,691	72,876
Trivandrum—						
Women's and Children's .	Dr. Mrs. Poonen Lukose, B.A., M.B., B.S. (Lond.), L.M. (Rotunda).	Do.	91	2,859	28,125	60,903
H. H. The Ran's Hospital, Pudukkottai.	Mrs. T. N. S. Kukde.	Pudukkotal State	36	614	14,207	40,905
9. BOMBAY STATES.						
Bhavnagar—						
Sri Gobinathji Maternity . .	Miss M. DeSouza, I. M. & S.	State	12	243	...	...

Details regarding Hospitals for Women for the calender year 1926— concluded.

Name and Location of Hospital.	Name of Medical Woman in Charge.	By whom supported.	No. of beds.	No. of In-patients.	No. of new Out-patients.	Total attendance of Out-patients, old and new.
9. BOMBAY STATES—<i>contd.</i>						
Dhrangadra—						
Sri Prankunvezba Zenana	Mrs. Vakil, B.A., M.B., B.S. (Bombay)	State	24	178	5,735	48,491
Junagadh—						
Coronation Memorial Zenana	Miss R. Dewaji, L.M.S., Miss N. Proctor Sims, M.R. & S. (Eng.)	State	24	196	11,140	58,553
Porbandar—						
Hancock Memorial for Women	Miss S. Kavi	State	27	274	3,483	18,637
Rajkot—						
Rasulkhanji Zenana	Dr. Rukhmabai	State General Fund.	...	463	3,364	7,431
Gondal—						
Nand Kunverba Zenana Hospital, Dhoraji.	....	By Public and Private Charity Funds.	6	...	3,777	5,272
Palanpur—						
Female Hospital	Dr. D'Silva, M.B., B.S.	Charitable Trust	7	1	3,702	22,875
Radhanpur—						
Diamond Jubilee Female . . . . .	....	State	4	3	2,399	10,673
10. UNITED PROVINCES STATES.						
Rampur—						
Zenana	Miss Ghose, L.M.S.	State	20	252	3,696	7,964
11. PUNJAB STATES.						
Bahawalpur—						
Jubilee Female	Miss E. A. Rider, M.D.	H. H. the Nawab of Bahawalpur.	22	6,889	14,478	37,501
Jind—						
Victoria Female, Sangrur	Dr. M. Jervis, M.R.C.S., L.R.C.P., D.T.M.	Jind Durbar	8	95	5,715	16,478
Kapurthala—						
Victoria Jubilee	Dr. G. M. Friend Pereira, M.D.	H. H. the Maha- raja.	30	629	22,581	47,592
Nahan—						
Shamsher Zenana	Mrs. Alema	H. H. the Maharaja.	19	86	3,357	10,263
Patiala—						
Lady Dufferin	Dr. Freany Cama	H. H. the Maharaja.	30	307	5,997	12,871
Hendley Female Dispensary	Mrs. L. Stanley, L.M.P.	H. H. the Maharaja.	...	..	5,289	12,396

ANNEXURE IX.

LIST OF SANCTIONED POSTS.

Women's Medical Service (Senior Branch).

APPOINTMENTS IN AREAS DIRECTLY UNDER THE GOVERNMENT OF INDIA.

I.—Administrative.

1. Chief Medical Officer, Women's Medical Service, Secretary, Associated Funds, Miss A. C. Scott, M.B., London.
2. Personal Assistant to the Chief Medical Officer, Dr. Ruth Young, M.B., ch.B., B.Sc. (Not a W. M. S. officer).

II.—Simla.

3. Medical Superintendent, Lady Reading Hospital, Miss C. Houlton, M.D., B.S., London, Cert. Trop. Med., London.
4. Resident Medical Officer, Lady Reading Hospital, Miss H. Acheson, M.B., B.S. (Lond.).

III.—Delhi.

Staff of the Lady Hardinge College—

5. Principal and Professor of Obstetrics and Gynæcology, Miss G. J. Campbell, M.D., ch.B., Glasgow, Cert. Trop. Med. (London).
6. Professor of Surgery, Miss E. Pfeil, M.B., B.S., L.R.C.P. (Lond.), M.R.C.S. (England).
7. Professor of Anatomy, Miss K. McDermott, M.B., B.S. (Punjab).
8. Professor of Medicine, Miss G. P. Patel, M.B., B.S., (Lond.) D.T.M., (Calcutta).
9. Professor of Pathology, Miss L. Chatterji, M.B., ch.B. (Aberdeen), D.P.H. (Cantab), D.T.M. & H. (Lond.).
10. Lecturer on Ophthalmology, Miss Roulston, M.B., ch.B., D.O.
11. Professor of Physiology, Miss M. S. Macdonald, M.B., ch.B., (Liverpool).
12. Radiologist, Miss Pilley, M.R.C.S., L.R.C.P., M.B., B.S. (Lond.)

13. Victoria Zenana Hospital, Medical Officer, Miss H. Keane, L.R.C.P. & S. (Edinburgh).

IV.—Baluchistan.

14. Medical Officer i/c Dufferin Hospital, Quetta, Mrs. G. Brindley (Nee Davidson), M.B., ch.B. (Edin.).

V.—North-West Frontier Province.

15. Medical Officer i/c Municipal Zenana Hospital, Dera Ismail Khan, Miss D. Bolton, M.R.C.S., L.R.C.P.

VI.—Indian States.

16. Cutch State, Medical Officer i/c Zenana Hospital, Miss M. A. D. Naoroji, M.B., ch.B. (Edin.).

APPOINTMENTS IN GOVERNORS' PROVINCES UNDER THE CONTROL OF THE LOCAL GOVERNMENTS.

Madras.

1. Superintendent, Victoria Government Hospital, Mrs. O'Brien Beadon, M.B., B.S. (London), L.S.A.

United Provinces.

2. Senior M. O., W. M. S., and Superintendent, Medical Aid for Women, United Provinces, Miss S. H. Commissariat, F.R.C.S.I., L.M. (Rot.), Cert. Trop. Med., London, L.M.S., Bombay.
3. Principal, Women's Medical School, Agra, Miss M. V. Webb, L.R.C.P. & S.E., L.F.P. & S.G.
4. 2nd Medical Woman, Women's Medical School, Agra (tuitional) Miss M. Stowe, M.B., ch.B. (Paid by Central Committee, Countess of Dufferin's Fund).

APPOINTMENTS IN GOVERNORS' PROVINCES UNDER PROVINCIAL DUFFERIN FUND COMMITTEES OR IN PRIVATE INSTITUTIONS.

Madras.

1. Superintendent, Women's Hospital, Vizagapatam, Miss H. Lazarus, M.R.C.S. (England), L.R.C.P. (London), M.B. B.S. (Madras), L.M. (Rot.) F.R.C.S. (Edin.).

Bombay.

2. Superintendent, S. M. V. Hospital, Surat, Mrs. Kamalakar, L.R.C.P. & S.E., L.F.P. & S.G.
3. Medical Officer i/c Dufferin Hospital, Shikarpur, Miss M. C. Murphy, M.R.C.S. (England), L.R.C.P. (London), M.B. (Calcutta).
4. Superintendent, Dufferin Hospital, Karachi, Mrs. E. O'Sullivan (*Née* Stewart), M.A., M.B., ch.B. (Edin.).
5. Medical Officer i/c Hyderabad Sind, Miss A. Dodhi, M.B., B.S. (London), F.R.C.S. (Edin.).

Bengal.

6. Superintendent, Dufferin Hospital, Calcutta, Miss G. Stapleton, M.D., B.S. (London).
7. Resident Medical Officer, Dufferin Hospital, Calcutta, Miss U. Morton, M.D., B.S. (Lond.).

United Provinces.

8. Medical Officer i/c Dufferin Hospital, Allahabad, Miss E. Walker, M.B., B.Ch. (Belfast), D.P.H. (London).
9. Medical Officer i/c Dufferin Hospital, Lucknow, Miss C. Slater, M.B., B.S. (London).
10. Medical Officer i/c Dufferin Hospital, Benares, Miss B. Thungamma, F.R.C.S. (Edin.).
11. Medical Officer i/c Dufferin Hospital, Cawnpore, Miss I. Kees, M.R.C.S., L.R.C.P. (London).

Punjab.

12. Medical Officer i/c Lady Aitchison Hospital, Lahore, Miss H. M. Franklin, M.B., B.S. (London).

Bihar and Orissa.

13. Superintendent, Raj Dufferin Hospital, Bettiah, Miss E. B. Hollway, M.B., B.S. (London).
14. Superintendent, Lady Elgin Hospital, Gaya, Miss L. de Menezes, F.R.C.S.I.

Central Provinces and Berar.

15. Superintendent, Dufferin Hospital, Nagpur, Miss N. R. Mucadam, M.R.C.S., L.R.C.P. (London), M.B., B.S. (Bombay).
16. Superintendent, Lady Elgin Hospital, Jubbulpore, Mrs. L. M. Bose, F.R.C.S.I.
17. Superintendent, Lady Hardinge Hospital, Akola, Mrs. F. D. Barnes, L.R.C.P. & S.E., L.F.P. & S.G., M.D. (Brux.).
18. Superintendent, Women's Hospital, Chhindwara, Miss J. R. Maclean M.B., Ch.B. (Edin.).
19. Dufferin Hospital, Amraoti, Miss D. D'Abreu, L.R.C.P., M.R.C.S., D.P.H.

Leave Reserve.

1. Miss M. A. Murphy, M.B., B.Ch. (Belfast), D.P.H. (Edin.).

On Leave.

1. Miss Hamilton Browne, M.B., Ch.M.
2. Miss A. R. H. Grieg, M.B., Ch.B. (Edin.)
3. Miss A. M. Watts, L.R.C.P. & S.E., L.F.P. & S.G., L.M. (Rot.).
4. Miss G. Mhd. Ali, M.B., B.S. (Lucknow).
5. Miss N. Trouton, M.B., B.S. (London), M.R.C.S., L.R.C.P.

Training Reserve.

4th year—

1. U. K. Scholarshipholder, Miss Alphonso, M.B. (Calcutta).
2. U. K. Scholarshipholder, Miss Singham, M.B.

3rd year—

3. On probation, W. M. S., Dr. A. Cama, M.B., B.S. (Bombay), M.B.C.S. (Eng.),
L.B.C.P. (London), L.M. (Rotunda).
4. On probation, W. M. S., Vacant.

2nd year—

5. R. M.O., Lahore, Miss Bali, M.B., B.S. (Bombay).
6. R. M. O., Agra, Miss Bharucha, M.B., B.S. (Punjab).

1st year—

ANNEXURE X.

SENIORITY LIST.

Officers of the Women's Medical Service.

1. CAMPBELL, Miss G. J., M.D., ch.B. (Glas.), Cert. Trop. Med. (London).
2. SCOTT, Miss A. C., M.B. (London).
3. BARNES, Mrs. F. D., L.R.C.P. & S.E., L.F.P. & S.G., M.D. (Brux).
4. O'BRIEN BEADON, Mrs. M., M.B., B.S. (London), L.S.A.
5. NAOROJI, Miss M. A. D., M.B., ch.B. (Edin).
6. WEBB, Miss M. V., L.R.C.P. & S.E., L.F.P. & S.G.
7. COMMISSARIAT, Miss S. H., F.R.C.S.I., Cert. Trop. Med. (London), L.M.S. (Bombay).
8. FRANKLIN, Miss H. M., M.B., B.S. (London).
9. HOULTON, Miss C. L., M.D., B.S. (London), Cert. Trop. Med. (London).
10. MURPHY, Miss M. C., M.R.C.S. (England), L.R.C.P. (London), M.B. (Calcutta).
11. BOSE, Mrs. L. M., F.R.C.S.I.
12. HOLLWAY, Miss E. B., M.B., B.S. (London).
13. KAMALAKAR, Mrs. D., L.R.C.P. & S.E., L.F.P. & S.G., L.M.S. (Madras).
14. BROWNE, Miss HAMILTON, M.B., ch.M. (Sydney).
15. MURPHY, Miss M. A., M.B., B.ch. (Belfast), D.P.H. (Edin.).
16. LAZARUS, Miss H., M.R.C.S. (England), L.R.C.P. (London), M.B., B.S. (Madras), F.R.C.S. (Edin.)
17. SLATER, Miss C. B., M.B., B.S. (London).
18. BRINDLEY, Mrs. G. E. M., (*Nee* Davidson) M.B., ch.B. (Edin).
19. STAPLETON, Miss G., M.D., B.S. (London).
20. PEEIL, Miss E., M.B., B.S., L.R.C.P. (London), M.R.C.S. (England).
21. DE MENEZES, Miss L., F.R.C.S. (Ireland).
22. WALKER, Miss E. S., M.B., B.ch. (Belfast), D.P.H. (London).
23. KEES, Miss IVY, M.R.C.S. (England), L.R.C.P. (London), L.M. & S. (Bombay).
24. GREIG, Miss A. R. H., M.B., ch.B. (Edin.).
25. THUNGAMMA, Miss BOLAR, F.R.C.S. (Edin.), L.M.S. (Madras.).
26. MAHOMED ALI, Miss G., M.B., B.S. (Lucknow).
27. BOLTON, Miss D., M.B. (Calcutta), L.R.C.P., M.R.C.S. (England).
28. PATEL, Miss G. P., M.B., B.S. (London), D.T.M. (Calcutta).
29. TROUTON, Miss M. E., M.B., B.S. (London), M.R.C.S., L.R.C.P.
30. MUCADAM, Miss N. R., M.R.C.S. (England), L.R.C.P. (London), M.B.B.S. (Bombay), Cert. Trop. Med. (London).
31. O'SULLIVAN, Mrs. E. (*Nee* STEWART), M.A., M.B., ch.B. (Edin.)

32. CHATTERJI, MISS L., M.B., ch.B. (Aberdeen), D.P.H. (Cambridge), D.T.M. & H. (London).
33. MACDONALD, MISS M. S., M.B., ch.B. (Liverpool).
34. MACLEAN, MISS J. R., M.B., ch.B. (Edin.).
35. ROULSTON, MISS R. E., M.B., ch.B. (Glasgow), D.O. (Oxon).
36. DODHI, MISS A., M.B., B.S. (Bombay), M.B., B.S. (London), F.R.C.S. (Edin.).
37. STOWE, MISS M., M.B. ch.B. (Glasgow).
38. PILLEY, MISS E., M.B. (London), M.R.C.S., L.R.C.P.
39. MORTON, MISS M., M.D., B.S. (London), M.R.C.S., L.R.C.P., D.T.M. & H.
40. McDERMOTT, MISS K., M.B., B.S. (Punjab).
41. ACHESON, MISS H. E., M.B., B.S. (London), M.R.C.S., L.R.C.P.
42. WINGATE, MISS. E., M.B., B.S. (London), M.R.C.S., L.R.C.P. (England).

Temporary Members.

1. KEANE, MISS H., L.R.C.P. & S.
2. D'ABREU, MISS D., L.R.C.P., M.R.C.S., D.P.H.

Training Reserve.

1. SINGHAM, MISS J., M.B. (Calcutta).
2. ALPHONSO, MISS G., M.B. (Calcutta).
3. BHARUCHA, MISS, M.B., B.S. (Bombay).
4. BALL, MISS, M.B., B.S. (Punjab).
5. CAMA, MISS A., M.B., B.S. (Bombay), M.R.C.S., L.B.C.S. (London).

ANNEXURE XI.**List of Sanctioned Posts in the Women's Medical Service,
Junior Branch.**

APPOINTMENTS IN AREAS DIRECTLY UNDER THE GOVERNMENT OF INDIA.

Simla.

1. House Surgeon, Lady Reading Hospital, Miss M. Barlow, Apothecary, Madras.

Baluchistan.

2. Doctor i/c McIvor Hospital, Sibi, Miss A. Singha, L.R.C.P. & S.E., L.M. (Rot.).
3. Doctor i/c Zenana Hospital, Fort Sandeman, Miss Polette Roberts, Cert. Pract., Punjab.

APPOINTMENTS IN GOVERNORS' PROVINCES UNDER LOCAL BODIES OR IN PRIVATE INSTITUTIONS.

Bombay.

1. House Surgeon, Hyderabad (Sind), Miss A. Alfred, L.M.S. (Lahore).
2. House Surgeon, S. M. V. Hospital, Surat, Miss E. Basil, Cert. Pract. (Lahore).

Punjab.

3. 1st House Surgeon, Lady Aitchison Hospital, Lahore, Miss M. Lee, Cert. Pract. (Lahore.)
4. Doctor i/c Female Hospital, Lyallpur, Mrs. Lewin, Med. Pract. (Bombay), L.M. (Rot.), M.D. (Brux).
5. Doctor i/c Zenana Hospital, Rawalpindi, Miss M. E. Franklin, Cert. Pract. (Lahore.)

Bihar and Orissa.

6. House Surgeon, Lady Elgin Hospital, Gaya, Miss A. Paul, L.M. & S. (Bombay).

Central Provinces.

7. House Surgeon, Lady Dufferin Hospital, Nagpur, Miss M. M. Joseph, Cert. Pract. (Madras).
8. Doctor i/c Shegaon, Miss U. M. Lobo, L.M. & S. (Bombay).

**Seniority List of Officers of the Women's Medical Service,
Junior Branch.**

1. MISS A. ALFRED, L.M.S., Lahore.
2. MISS M. E. FRANKLIN, Cert. Pract. (Lahore).
3. MRS. LEWIN, Med. Pract., Bombay, L.M. (Rotunda), M.B. (Brux.).
4. MISS U. M. LOBO, L.M.S. (Bombay).
5. MISS A. C. P. ROBERTS, Cert. Pract., (Punjab).
6. MISS A. PAUL, L.M. & S. (Bombay).
7. MISS M. M. JOSEPH, Cert. Pract. (Madras).
8. MISS A. SINGHA, L.R.C.P. & S.E., L.M. (Rot.)
9. MISS E. BASIL, Cert. Pract., (Lahore).
10. MISS M. BARLOW, Apothecary, (Madras).
11. MISS M. LEE, Cert. Pract., (Lahore).

ANNEXURE XII.

Countess of Dufferin's Fund.

The following Scholarships, prizes and medals are awarded by the Council of the Countess of Dufferin's Fund :—

SCHOLARSHIPS.

Muir Scholarship.

One of Rs. 30 p. m. tenable at the Medical College, Calcutta.

Two of Rs. 10 p. m. tenable at the Campbell Medical School, Calcutta.

Petit Scholarships.

One of Rs. 30 p. m. tenable at Medical College, Calcutta.

Gilchrist Scholarship.

Six of Rs. 30 p. m. tenable at the Lady Hardinge Medical College, Delhi.

Council Scholarships.

Ten of Rs. 30 p. m. tenable at the Lady Hardinge Medical College, Delhi.

Three of Rs. 30 p. m. tenable at the Medical College, Madras.

Three of Rs. 30 p. m. tenable at the Medical College, Bombay.

One of Rs. 30 p. m. tenable at the Medical College, Calcutta.

Fawcett Scholarships.

Two of Rs. 30 p. m. tenable at the Lady Hardinge Medical College, Delhi, or any other Medical College in India of the same standard.

These scholarships are offered to undergraduate women students. Application for rules, etc., should be made to the Secretary, Countess of Dufferin's Fund, Viceregal Estates, Simla.

LADY DUFFERIN PRIZE.

One prize of Rs. 25 p. a. for sub-assistant surgeons in the Agra Medical School, to be awarded to the student, who, in the annual examination, stands highest in clinical medicine and surgery, provided that she obtains two-thirds marks, and that her conduct during the past 12 months has been in every way satisfactory.

MEDALS.

M. B. Students.

One gold Queen Empress Medal to be awarded for exceptional merit at the discretion of the Council.

Four silver Viceroy's medals to be offered annually to the Medical Colleges of Madras, Bombay, Calcutta and Delhi, for award to the woman student who passes highest in the final M.B. examinations in each of these colleges. These medals shall be awarded by the University authorities.

Sub-Assistant Surgeon class.

Two silver Viceroy's medals to be offered annually to the Medical Schools at Agra and Ludhiana for the woman student who passes highest in the final qualifying examination, provided she obtains at least 60 per cent. of the available marks. These medals shall be awarded by the Examining Boards.

VICTORIA MEMORIAL SCHOLARSHIPS FUND

**Twenty-fifth Annual Report of the
Victoria Memorial Scholarships Fund,
1926.**

VICTORIA MEMORIAL SCHOLARSHIPS FUND.

Centres at work.

Name of Centre.

Address of Secretary.

A.—INDIAN STATES.

- | | |
|----------------------------|---|
| 1. Hyderabad | The Director, Medical and Sanitation Department,
H. E. H. The Nizam's Dominions. |
| 2. Central India States :— | |
| (i) Bhopal | Agency Surgeon, Bhopal. |
| (ii) Indore | Do. Indore. |
| 3. Rajputana | Residency Surgeon and C. M. O., Ajmer. |
| 4. Baroda | Chief Medical Officer, Baroda. |
| 5. Kashmir | Superintendent, Zenana Hospital, Srinagar. |
| 6. Gwalior | Medical Officer to H. H. The Maharaja, Gwalior. |
| 7. Bombay States :— | |
| (i) Gondal | Chief Medical Officer, Gondal. |
| (ii) Junagadh | Political Agent, Kathiawar. |

B.—OTHER AREAS OUTSIDE GOVERNORS' PROVINCES.

- | | |
|--------------------------|--|
| 8. Baluchistan | Chief Medical Officer, Quetta. |
| 9. Bangalore | Health Officer, Station Municipality, Bangalore. |

C.—GOVERNORS' PROVINCES.

- | | |
|--|--|
| 10. Bombay, Hyderabad (Sind) | Miss Piggott, Hyderabad (Sind). |
| 11. Bengal | Surgeon General, Bengal, Calcutta. |
| 12. U. P. | Inspector-General of Civil Hospitals, Lucknow. |
| 13. Punjab | Inspector-General of Civil Hospitals, Lahore. |
| 14. Bihar and Orissa | Inspector-General, Civil Hospitals, Ranchi. |
| 15. C. P. & Berar :— | |
| (i) C. P. | Hony. Secy., Dufferin Fund, Nagpur. |
| (ii) Berar | Hony. Secy., Dufferin Fund, Amraoti. |

CHAPTER III.

The Victoria Memorial Scholarships Fund.

It is not easy to write anything very novel or interesting when the work of the Fund proceeds along more or less established lines from year to year. That there is general progress is undoubted, but the progress is slow year by year, and one has to go back a number of years to be aware of the change that is gradually taking place. Even then we cannot feel satisfied with the rate of progress, when, in a tract of country like Sindh, Miss Piggott, who has been doing intensive work for a number of years, declares that only 200 women out of a possible number of 5000 have been trained. This is disquieting, and the feeling of anxiety is not lessened by the realisation that the training of the remainder of the dais is still a matter of great difficulty and cannot be rapidly accomplished. The possibilities of training dais are roughly three—(1) by medical men and women, (2) by Health Visitors and, (3) by Hospitals. What are the prospects in each case? (1) Training by doctors—It is true that the number of doctors increases yearly, but it does not follow that all who qualify are available for the work. In the case of women, there is a good deal of actual leakage through marriage and for other reasons. Those who qualify, too, if they enter hospitals or engage in private practice, are usually found in towns, and so the village areas are still left untouched. Those in private practice do not come forward readily to undertake laborious and usually unpaid work which requires real enthusiasm and devotion to make it successful. Training by men doctors is, we feel, not likely to be very satisfactory, and is impossible in many parts of India. A scheme for the training of dais in Bengal has been started, under which dais are trained in districts by medical men, private practitioners, who are subsidised for the purpose. Such training centres have been started in 36 places. The results of this experiment will be watched with interest, and one can only hope for success. The feeling cannot, however, be avoided that such training is bound to be weak on its practical side and that the actual deliveries will be witnessed by the teacher in very few cases.

(2) Training by Health Visitors. This is perhaps the most promising avenue for future development. Health Visitors, as mentioned in our last year's report, are definitely trained to instruct dais, and this is regarded as a most important part of their work. Health Visitors, if they proceed in the right way, can quickly get into touch with the dais and have ample opportunity, usually, of witnessing their cases while under training and of supervising their subsequent work. As will be seen in the report of the Lady Chelmsford League, a much larger number of Health Visitors is required than that coming forward for training at present. If the number increases the number of dais brought under training will naturally increase.

(3) Training in hospitals. For reasons which have frequently been mentioned the training of dais in hospitals is a very difficult matter. Village dais are unwilling to leave their homes and indeed can scarcely afford to do so. Hospital life is utterly foreign to them and they find it hard to appreciate. Nevertheless, an attempt is being made to send dais from villages in the Bombay Presidency and in the Central Provinces to have two weeks' intensive training in hospitals. While realising that new methods must be attempted one cannot feel sanguine of the effect of such a brief training on the minds of illiterate people, especially when they return to their former places of work and are not supervised.

A more hopeful experiment is that in Dehra Ismail Khan, mentioned in the report of the Lady Chelmsford League on page 87 where dais from the districts are being sent to the child welfare centre for six months' intensive training. But provision will have to be made ultimately for the supervision of the work of such trained dais subsequently.

Supervision is a difficulty that has to be faced and if possible overcome, just as training must be. If in England where midwives are educated and able to carry out the methods they have been taught in practice, supervision is still required, how much more so in India where the temptations to let standards fall are much greater. In a few years time it may be that this problem will be more acute than that of the actual training of dais. Every one is agreed that to train dais without making provision for subsequent supervision is next door to useless.

Reports from Centres.

Indian States.

Gwalior. Eighteen classes were held and the number under training at the end of December was 58. The number of cases attended by passed dais was 1292. In five places in the State there are maternity Homes where the dais under training have opportunities of doing practical work. The establishment of other similar homes is contemplated. A nursing class for passed out dais is held at the Ujjain Civil Hospital.

Hyderabad (Deccan). Ten new pupils were admitted during the year. Nine were admitted for the examination and passed.

Bhopal. Six pupils were under training.

Baroda. Six pupils are under training. Six appeared for the examination and all passed. Out of a total of 3509 births, 2037 were visited by dais during the first week after confinement, and 213 cases were conducted.

Gondal. Two dais are under training.

Kashmir. The Kashmiri women are gradually appreciating the benefit of the hospital and becoming in-patients. The beginnings of Antenatal work are being in-

troduced. The women are responding to it by coming to be examined early during their pregnancy and at frequent intervals throughout. Some are at last realizing the importance of the examination of urine during pregnancy and pelvic measurements before the onset of labour. When told that hospital treatment will be necessary we find that they do come to hospital.

Nineteen students attended the class at Indore. Of these 14 were still attending in December and were to appear for their examination in January. Their work was satisfactory.

Central India.

The "Dais Improvement Scheme" continues its good work. In the beginning of the year a class was started at Tando Bago (Hyderabad District) where 19 dais were collected. They came from miles away, worked really hard, all attending lectures twice a day. 18 appeared for the examination and all passed, 12 in the first class. A nurse was sent to Mamshah in the Nawabshah District for 3 months to train the local dais; four appeared for the examination and all passed. In another place in the same district a nurse is looking after the dais, but they are not keen on learning. The men of the place however, are very keen, as they have lost their wives in many cases. Jacobabad District was visited for the first time. Lectures were given at the house of a pleader, in the girls' school, and the Panchayat Hall for Hindus. Three villages were also visited. The awakening interest on the part of men is a very hopeful sign. If a real demand comes from the public, the dais will be forced to learn better ways. Miss Piggott emphasises once more the need for supervision of the passed out dais owing to the likelihood of their relapsing into old ways, and along with this points out the need for educating the women as so often they insist on the old dangerous methods being continued even when the dai knows better.

Hyderabad (Sindh)

During the year 55 dais have been under instruction, 26 have appeared for and passed examinations and 192 have been under supervision.

Forty trained dais are now working in Quetta who reported 845 cases during the year. The number of abnormal cases is very small. The inspection of cases is carried on by the doctors in charge of the Dufferin and Zenana Hospitals, and by the Health Visitors. The latter also carry on a training class for dais and the attendance is becoming more regular and the dais keener in their work.

Baluchistan.

In Sibi there are 4 qualified dais working and 2 under training. They are inspected by the supervising midwife in each case.

The number of centres assisted is 9 and "a marked improvement in the quality of the work of the trained dais is reported." In addition five other places, not assisted by the fund are training dais.

Punjab.

Ten indigenous dais are under training. "Several of these are ready to take their examination but are being kept back as better work is expected of them now than after they have received their certificates. There is already

Ambala.

a great deal of rivalry between the certificated and uncertificated Dais." A very healthy rivalry and may the best side win. The need for a maternity supervisor is greatly felt.

Amritsar. Twenty-two women are being trained for the " nurse dais " certificate and the work of all practising dais is supervised by the Superintendent of the Dais Training School.

Asrapur. Twenty-nine dais are in training from 16 different villages. Antenatal work is badly needed. The quality of the dais work shows great improvement.

Jagadhri. Is a recently started centre and a class is also held at Chachrauli. Again improvement in the quality of the dais work is already noticeable. A nurse supervises the work and attends normal cases, visiting till the 10th day.

Jhelum. Ten women were in the class at the beginning of the year. Seven are still under instruction and more are expected to join.

Jullunder. It is computed that there are nearly 1400 villages with 1,100 indigenous dais in the district. At present two centres have been established in the Tahsil. The dais attend for 3 months and if found unsuitable at the end of this period are dismissed. The difficulties met with are many, the chief being—

1. The dais are generally over age, most of them are either blind or deficient in sight.
2. Dais are always of the lowest caste, viz. " Kamīn " with the result that they are absent from the class at each harvest and festival.
3. Dais have to come from long distances to attend the class and their attendance is therefore not regular. It is also very difficult to supervise their cases at different villages.

Lahore (Mozang). Thirty-five dais are on the register. Their cases are supervised by the Lady Health Visitor or her assistants. Simple outfits are provided. Great improvement is noted in the person, dress and cleanliness of the class dais.

(*Qila Gujar Singh*).—Twenty-two dais are on the register, in fact all the dais in the area have been, or are being, trained here. No case of sepsis occurred among the work conducted by the dais under training for three years.

Ludhiana. Here there are 100 untrained and 30 trained dais working in the city. Birth lists are supplied by the Municipality and the cases visited. 1866 visits were paid during the year. One rather depressing feature is noted. " It seems impossible to persuade the trained dais to use the bags with which they are provided for aseptic work. It has also been noticed that if their mistakes are pointed out to them they would not call in the doctor next time."

Narowal. Eleven dais are on the roll of whom 4 will appear for the next examination. Here again difficulties are met with owing to the prejudice and ignorance of the dais.

Simla. The work has been commented on in the report of the Lady Chelmsford League as the work is so bound up with that of the Infant Welfare Centre.

11 dais are still under training, but Simla can congratulate itself on looking forward to the day, and no distant one, when the reign of the untrained dai will be at an end.

At Ajmer 22 dais were under training from 5 Indian States. These women Rajputana. have the advantage of spending some time in the Women's Mission Hospital and Maternity Hospital besides the Maternity Home.

A class for training dais has been opened at Jubbulpore, and six are attend- **Central**
ing. In Saugor the class numbers 10. **Provinces.**

In Nagpur 90 dais are enrolled. The work is under the Municipality.

In Dacca a flourishing class among indigenous dais has been carried on by **Bengal.**
S. A. S. Miss Roy in connection with the Dacca Maternity and Child Welfare **Dacca.**
Trust. Among the Desi Dais 28 are working under the supervision of the Trust Staff. The first examination, held in 1925 by Dr. Scott at her annual visit to Dacca, resulted in the selection of 6 dais for intensive training; of these 4 passed the Victoria Memorial Scholarships Fund examination held in December 1926.

The Honorary Secretary of the Trust, Dr. P. C. Sen, who is Medical Officer of Health, Dacca, writes that "Facilities for ante-natal consultations at the centres cannot be availed of freely by reason of the difficulties of the Purdah. Over 8,000 visits had therefore to be paid to private houses last year for supervision of expectant mothers and cognate purposes by the Maternity Supervisors and midwives.

Domiciliary midwifery, in view of the social customs, and usages in force, must continue to be the main channel for conveying relief to the large majority of needy cases for some time to come. A partial solution of the difficulty may be found in the establishment of a women's hospital in Dacca. The Countess of Dufferin's Fund offered the services of a member of the Women's Medical Service free, provided the Trust could meet other expenses. This offer, unfortunately, could not be availed of for financial reasons. It is to be hoped, however, it will be found possible to finance a scheme for women's hospitals in the near future."

The Victoria Memorial Scholarships Fund are paying Rs. 120 p.m., to the Darjeeling. Sister in charge of the dais' class in connection with the Victoria Hospital. No report was received from this centre in time for publication.

THE VICTORIA MEMORIAL SCHOLARSHIPS FUND.

The Annual Account and the statement of the Closing Balance of the Fund are shown in Annexure I to this chapter.

2. The interest realised during the year amounted to nearly Rs. 41,000 while miscellaneous receipts amounted to under Rs. 250. The total receipts during the year amounted to a little over Rs. 41,000.

3. As against this, the total expenditure has amounted to under Rs. 47,000. Rs. 6,400 was paid towards the cost of the Central Office and Rs. 3,250 contributed to the Lady Chelmsford League for Exhibition and Propaganda work. A contribution of Rs. 1,000 was also made to National Baby Week. The expenditure in Indian States amounted to over Rs. 11,500, in Governors' Provinces to about Rs. 15,000 while the expenditure in other than Governors' Provinces amounted to Rs. 9,700, including the non-recurring grant of Rs. 5,000 to Delhi towards equipment of the New Health School. The miscellaneous expenditure during the year amounted to Rs. 50 only.

4. Thus, during the year, the expenditure of the Fund exceeded the ordinary income by about Rs. 6,000, resulting in the reduction of cash balance from about Rs. 16,000 to about Rs. 10,000.

5. The assets of the Fund are about 8 lacs while the liabilities are nil.

**Annexure I.—Annual Accounts and
Statement of Closing Balance.**

ANNEX

Annual Account of the Victoria Memorial

RECEIPTS.

Items.		Receipts, 1926.	Budget, 1926.
		RS. A. P.	Rs.
1. Opening balance—			
	RS A. P.		
Investments	7,88,778 12 2		
Cash	15,687 2 2	8,04,460 14 4	10,000
2. Interest on Investments		40,877 8 0	40,880
3. Sale of Books, etc.		237 0 0	820
TOTAL		8,45,575 6 4	51,700

URE I.

Scholarships Fund, 1926.

EXPENDITURE.

Items.	Expenditure, 1926.			Budget, 1926.
	RS.	A.	P.	RS.
1. Contribution to the Countess of Dufferin's Fund, on account of Central Office Expenditure.	6,400	0	0	6,400
2. Contributions—				
(1) Lady Chelmsford League towards Exhibition and Propaganda expenses.	3,250	0	0	3,250
(2) Baby Week	1,000	0	0	1,000
3. Expenditure in Indian States—				
(a) Hyderabad	1,100	0	0	1,100
(b) Baroda	800	0	0	800
(c) Gwalior	3,500	0	0	3,500
(d) Central Indian States—				
(1) Bhopal and Sehore	660	0	0	660
(2) Indore	1,450	0	0	1,450
(e) Rajputana States	3,742	0	0	3,742
(f) Bombay States—Gondal	300	0	0	300
4. Expenditure in other than Governors' Provinces—				
(a) Delhi	5,960	0	0	5,960
(b) North-West Frontier Province	2,280	0	0	900
(c) Baluchistan	960	0	0	960
(d) Bangalore	500	0	0	400
5. Expenditure in Governors' Provinces—				
(a) Bombay (Hyderabad)	1,200	0	0	1,200
(b) Bengal (Dacca and Darjeeling)	3,184	8	0	3,920
(c) United Provinces	3,300	0	0	3,300
(d) Punjab	3,407	0	0	3,407
(e) Bihar and Orissa	2,580	0	0	2,580
(f) Central Provinces	1,188	0	0	1,188
6. Miscellaneous	52	5	0	183
Closing Balance (as per statement attached)	46,813	13	0	46,200
	7,98,761	9	4	5,500
TOTAL Rs.	8,45,575	6	4	51,700

Examined and found correct.

PRICE, WATERHOUSE, PEAT & CO.,

Chartered Accountants,

Auditors.

M. F. GAUNTLETT,

Honorary Treasurer.

CAWNPORE;
4th March 1927.

Statement of Closing Balance of the Victoria Memorial Scholarships Fund on 31st December 1926.

Assets.	Face Value.	Cost.	Market Value.
	RS. A. P.	RS. A. P.	RS.
1. 3½ per cent. G. P. Notes, 1842-43	700 0 0	93,847 1 6	516
2. 3½ per cent. G. P. Notes, 1854-55	11,000 0 0		8,580
3. 3½ per cent. G. P. Notes, 1865	83,800 0 0		65,354
4. 3½ per cent. G. P. Notes, 1879	1,500 0 0		1,170
5. 3½ per cent. G. P. Notes, 1900-01	3,000 0 0		2,340
6. 4½ per cent. Rangoon Municipal Debentures, 1904	2,59,000 0 0	2,85,450 0 0	2,41,335
7. 6 per cent. War Bonds, 1931	40,000 0 0	39,976 10 8	43,200
8. 6½ per cent. Bombay Development Loan, 1935	3,20,000 0 0	3,20,000 0 0	3,64,800
9. 5 per cent. Government of India Loan, 1945-55	50,000 0 0	49,500 0 0	54,000
	7,69,000 0 0	7,88,773 12 2	7,81,335
Cash	9,987 13 2	9,957 13 2	
GRAND TOTAL RS.	7,78,987 13 2	7,98,761 9 4	

**Sixth Annual Report of the Lady
Chelmsford All-India League for
Maternity and Child Welfare, 1926.**

LADY CHELMSFORD ALL-INDIA LEAGUE FOR MATERNITY & CHILD WELFARE. Branches of the League.

(See Rules 26 and 27.)

Name of Branch.

Address of Secretary.

A.—OTHER THAN GOVERNORS' PROVINCES.

Rajputana Hon. Secretary, Lady Chelmsford League, Ajmer.

B.—GOVERNORS' PROVINCES.

Madras Hon. Secretary and Treasurer, The Lady Chelmsford League, Victoria Buildings, Egmore, Madras.

United Provinces Hon. Secretary, Lady Chelmsford League, U. P. Branch, Lucknow.

Punjab Hon. Secretary, Lady Chelmsford League, Punjab Branch, Lahore.

The Lady Chelmsford All-India League for Maternity and Child Welfare.

Royal Patron.

HER IMPERIAL MAJESTY THE QUEEN-EMPRESS.

President.

HER EXCELLENCY THE LADY IRWIN, C.I.

Patrons.

H. E. the GOVERNOR of MADRAS.
 H. E. the GOVERNOR of BOMBAY.
 H. E. the GOVERNOR of BENGAL.
 H. E. the GOVERNOR of UNITED PROVINCES.
 H. E. the GOVERNOR of PUNJAB.
 H. E. the GOVERNOR of BURMA.
 H. E. the GOVERNOR of BIHAR and ORISSA.
 H. E. the GOVERNOR of CENTRAL PROVINCES.
 H. E. the GOVERNOR of ASSAM.
 The CHIEF COMMISSIONER of the NORTH-WEST FRONTIER PROVINCE.
 The CHIEF COMMISSIONER of COORG.
 The CHIEF COMMISSIONER of DELHI.
 The CHIEF COMMISSIONER of AJMER-MERWARA.
 The CHIEF COMMISSIONER of BALUCHISTAN.
 The VISCOUNTESS CHELMSFORD, C.I., G.B.E.
 The MOST HON'BLE the MARCHIONESS OF READING, C.I., G.B.E.
 His EXALTED HIGHNESS the NIZAM of HYDERABAD.
 H. H. the MAHARAJA of MYSORE.
 H. H. the MAHARAJA (GAEKWAR) of BARODA.
 H. H. the MAHARAJA of SIKKIM.

CENTRAL INDIA.

H. H. the MAHARAJA of AJAIGARH.
 H. H. the RAJA of ALIRAJPUR.
 H. H. the NAWAB of BAONI.
 H. H. the BEGUM of BHOPAL.
 H. H. the MAHARAJA of CHARKHARI.
 H. H. the MAHARAJA of CHHATARPUR.
 H. H. the MAHARAJA of DATIA.
 H. H. the MAHARAJA of DHAR.
 H. H. the NAWAB of JAORA.
 H. H. the RAJA of JHABUA.
 The RAO of KHLCHIPUR.
 H. H. the RAJA of NARSINGARH.
 H. H. the MAHARAJA of PANNA.
 H. H. the RAJA of RAJGARH.
 H. H. the MAHARAJA of RATLAM.
 H. H. the MAHARAJA of REWA.
 H. H. the RAJA of SAILANA.
 H. H. the MAHARAJA of SAMTHAR.
 H. H. the RAJA of SITAMAU.

RAJPUTANA.

H. H. the MAHARAWAL of BANSWARA.
 H. H. the MAHARAJA of BHARATPUR.
 H. H. the MAHARAJA of BIKANIR.
 H. H. the MAHARAO RAJA of BUNDI.
 H. H. the MAHARAJ-RANA of DHOLPUR.
 H. H. the MAHARAWAL of JAISALMER.
 H. H. the MAHARAJ-RANA of JHALAWAR.
 H. H. the MAHARAJA of JODHPUR.
 H. H. the MAHARAJA of KARAUJI.
 H. H. the MAHARAO of KOTAH.
 H. H. the MAHARAWAT of PARTABGARH.
 The CHIEF of SHAHPURA.
 H. H. the NAWAB of TONK.
 H. H. the MAHARANA of UDAIPUR.

MADRAS.

H. H. the MAHARAJA of COCHIN.

BOMBAY.

H. H. the MAHARAJA of BHAVNAGAR.
 H. H. the MAHARAO of CUTCH.
 H. H. the MAHARAJA of DHRANGADHRA.
 H. H. the THAKUR SAHIB of GONDAL.
 H. H. the MAHARAJA of IDAR.
 The THAKUR SAHIB of LIMBDI.
 H. H. the MAHARAJA of RAJPIPLA.
 H. H. the RAJ SAHIB of VANKANER.
 The THAKUR SAHIB of WADHWAN.

UNITED PROVINCES.

H. H. the RAJA of TEHRI.

PUNJAB.

H. H. the RAJA of BILASPUR.
 H. H. the RAJA of CHAMBA.
 H. H. the RAJA of FARIDKOT.
 H. H. the MAHARAJA of JIND.
 H. H. the MAHARAJA of KAPURTHALA.
 The NAWAB of LOHARU.
 H. H. the NAWAB of MALER KOTLA.
 H. H. the MAHARAJA of NABHA.
 H. H. the MAHARAJA of PATIALA.
 H. H. the MAHARAJA of SIRMUR.
 H. H. the RAJA of SUKET.

Vice-Patrons.

The MAHARANI of BURDWAN.

The TIKKA RANI SAHIBA of KAPURTHALA.

H. H. The NAWAB of RAMPUR, G.C.S.I., G.C.I.E., G.C.V.O.

H. H. The MAHARAO of KOTAH, G.C.S.I., G.C.I.E., G.B.E.

Vice-Presidents.

HIS Excellency Sir MALCOLM HAILEY, K.C.S.I., C.I.E.

The Hon'ble Dr. Mian Sir MUHAMMAD SHAFI,
K.C.S.I., C.I.E.
E. J. BUCK, Esq., C.B.E., Simla.

Lady DADABHOY, Nagpur, C. P.
Rai Bahadur Sir ONKAR MAL JATIA, Calcutta.
Rai Bahadur BALDEO DAS BIRLA, Calcutta.

Life Councillors. (Rule 4.)

R. B. Sir SARUPCHAND HUKM CHAND, Indore,
C. I.
B. BALDEO DAS DOODWALLA, Calcutta.
EDWIN JOHN, Esq., C.B.E., Agra, U. P.
S. R. NATH MAL, Raipur, C. P.

SETH BULAKI DAS, Lahore Cantonment,
Punjab.
The President, Bengal Turf Club, Calcutta.
Messrs. THE TATA IRON & STEEL CO.,
Bombay.



R. B. L. RAM CHAND LOHIA INFANT WELFARE CENTRE ATTACHED TO
LADY READING HEALTH SCHOOL.



GROUP OF MOTHERS AND BABIES AT WELFARE CENTRE.



LADY READING HEALTH SCHOOL, DELHI.



VIEW OF INNER COURTYARD, LADY READING HEALTH SCHOOL.

CHAPTER IV.

The Lady Chelmsford All-India League for Maternity and Child Welfare, 1926.

As the work of the League divides itself into three main activities, the Report may be conveniently considered under these headings.

I. Health Schools. II. Work of Centres. III. Propagande.

1. As in previous years four Health Schools were supported or assisted by the League, namely, those at Delhi, Lahore, Madras and Calcutta.

Delhi.—The bulk of the running cost of the Delhi Health School, now known as the Lady Reading Health School, is borne by the Lady Chelmsford League. In our last Report it was mentioned that the Health School was about to move into new and spacious quarters of its own. This year we have the satisfaction to report that the move has taken place and that the School is now in working order. The change is greatly to the benefit of all concerned. The students have now comfortable living quarters, ample class room and laboratory accommodation, and a recreation ground of their own. The situation of the School is open and healthy, a great contrast to the cramped accommodation of the past eight years. Further the students have the advantage of practical training in the Child Welfare Centre attached to the School, and controlled by it. While appreciating the generosity of the Municipality of Delhi in allowing the Health School the use of its centres for the training of students, we feel that it is a great advantage to have a centre as an integral part of the School. This is the more so as the Municipal work is no longer in the hands of Miss Graham and Miss Griffin who were at the same time directing the practical work of the students. In a Centre belonging to the School, new experiments can be carried out which may not always be possible in the case of a number of centres under a municipality.

The Centre itself claims to be a model and the claim can fairly be justified. The rooms surround a small open courtyard where the mothers and children can wait to be seen and at the same time be perfectly free of observation from outside. There are wide verandahs where they can wait when the season is wet. The rooms comprise the following, one room for antenatal work, one consulting room, a room where the treatment of minor ailments can be carried out, two bathing rooms, two rooms for the Health Visitor attached, a small observation ward, and a room which can be used for sewing or other classes. Hot water is laid on in the bathrooms. The attendance at the Centre averages already 35-40 daily. The situation of the School is such that it can draw on a number of different areas and classes of people. The quarters of one of the largest mills in Delhi are close by and also the quarters of railway

employees, such as firemen and fitters. On the other side is a congested bazaar with a mixed population. The surroundings, therefore, supply abundant material for the Centre, and in addition provide for the training in home visiting so necessary for Health Visitors.

Miss Graham and Miss Griffin, who have, since the inception of the School, directed the practical work of the students, have now severed their connection with the Municipality. The post of the Superintendent of the School was offered to, and accepted by, Miss Griffin. Through the kindness of Lady Reading, the School was also able to offer Miss Graham a post, and she is, as in former years, taking an active part in directing the students' practical work and in undertaking the training of the indigenous dais of the neighbourhood. It is a matter for congratulation that the services of two such experienced and devoted workers have been secured for the School, especially in the initial stages of a new experiment.

The course offered to students at the Lady Reading Health School is now a very complete one. Two subjects have been added to the curriculum, one a course in Vaccination and one in Child Psychology. The students are taught the theory of vaccination and its practical application. This is a most useful addition to the course. Health Visitors, on going to work in the various places where they are sent, can now assist the Medical Officer of Health in this most necessary part of preventive work. They will frequently be able to overcome the objection of parents by their friendship with the women gained through home visiting, and the services of a woman vaccinator will be appreciated by purdah women who do not like to face the public Vaccinator. The instruction is given by the Medical Officer of Health. The other addition, namely, that of a course in Child Psychology, has come as a surprise to some. Those in charge of the work, however, feel that it is most necessary to give the students an elementary knowledge of the workings of the Child mind. The students have to act as teachers in their subsequent work and they must pass on their knowledge to the mothers with whom they are in constant contact. Anyone who has studied the subject at all knows how such knowledge benefits those who have to bring up children and the Health Visitor is the person who has the greatest opportunity of instructing the mothers who are having to face this great responsibility. The course was greatly appreciated by the students who were unanimous in pronouncing it of great use to them in their work.

Advantage was taken of the money at our disposal for equipping the new Health School to make a large addition to the Library. The Library now contains the most useful volumes on Child Welfare and kindred subjects which are to be had. The total number of volumes is not large, but this is due to the fact that books suited to the course of studies are few in number. The Library, in addition to being a home for books, is a study room for the students, an advantage not open to them in their former quarters,

The number of students under training during the year 1925-26 in the English class was seven, and all were successful in passing the final examination, one in Grade A. Of these students one is working in a Syrian Girls' School in Travancore State where she gives instruction in Domestic Science and Mothercraft. One has been appointed as Health Visitor in charge of the new Child Welfare Centre, attached to the Health School. A third has been appointed to Dera Ismail Khan to act as assistant there. Another has returned to the Deccan and is working in Sholapur, a busy industrial centre. The services of another have been given to the Punjab where she is opening work in a new district. The remaining two students have got married and have refunded their stipends to the League.

As the number of students entering for the English class was small, the Committee decided to hold a vernacular class. It consisted of six students, and the level of intelligence was very fairly high. Of the six, three were stipend holders from the Lady Chelmsford League, United Provinces Branch, and have returned to that Province. One is working in a Punjab District and one has been appointed in the Central Provinces. The third was appointed to work among the families of Indian troops in Delhi New Cantonments. This is the first time that a trained Health Visitor has been appointed to such a post and the experiment has proved very successful. The worker is welcomed in the lines and has been of great service to the wives and children of the sepoys. Many more such workers could be employed were they available.

The foregoing shows how wide a net is cast by the Lady Chelmsford League in the disposal of its workers. Even the development of provincial Health Schools does not prevent our having demands for workers from all parts of India, and indeed from beyond its shores, for the League was asked last Autumn to assist in securing the services of a worker for work among Indians in Kenya Colony. There are thus unlimited possibilities before us and it is therefore a matter of great regret to the Committee that so few come forward to receive the training.

Before the opening of the new session the Committee had decided that an English class only would be held. The Secretary, up to a short time before the class commenced, was in correspondence with thirteen intending students. When the class was actually opened only five were in attendance. That the others did not materialise was due to a variety of causes, but shows that provision must always be made for the failure of a large proportion to appear. As the English class was so small, and there is accommodation for at least 12 students, the Committee decided to open the vernacular class after all. There are 7 students in the class, four of whom are stipend holders of the Lady Chelmsford League, United Provinces Branch. One other is already working in the "Baby Week" Centre in Delhi. The fact that of this number three are Hindu women and one a Mohammedan, shows that lack of education in English is probably a hindrance to others of the same communities to taking

up Health Visitors' work. This might be adduced as a reason for establishing a course in the vernacular permanently. There are, however, weighty arguments to such a proceeding. The lack of books for teaching purposes is one. Another is that, in North India at least, lack of English education denotes a want of general information and lack of background which is a serious drawback to the employment of the workers. Thirdly, since the salaries of such workers are fixed at a lower rate than those of the English class, the tendency is for employing authorities to select them as workers from motives of economy, motives which are often sadly mistaken. They are thus placed in posts requiring a greater amount of initiative and carrying more responsibility than they are equal to, with disastrous results for the work. The Committee therefore adheres to its opinion that if possible all students should enter the English class, and that vernacular students should not be employed except as assistants where they may do very useful work.

The Committee feels that every effort must be made to induce well-educated girls to take up this most important profession and intends to do further propaganda with this in view. The granting of an increased number of scholarships for the preliminary midwifery course is also contemplated. If success is attained the Lady Reading Health School is sure to have a long and useful career before it.

The Punjab Health School.—The session for 1925-26 closed in April when three students appeared for the examination and all were successful in passing. The new session opened in October and the number of pupils has been higher than in any previous year. Nine have been admitted of whom two are private pupils living in their own homes; one is a Sub-Assistant Surgeon.

The Superintendent writes: "This year's set is particularly promising, being keen and enthusiastic for the profession. Most of them are already promised to local bodies." The fact that the Punjab Health School is able to secure such a satisfactory number of candidates is due to a number of factors. The Secretary of the Lady Chelmsford League, Punjab Branch, does a good deal of touring in the province and so is able to arouse the interest of possible candidates. The whole province appears to be interested in health work, and the education of girls is proceeding at a rapid pace. In addition there is a widespread interest, not only in Health workers, but in social service, and this is a most valuable motive in securing the services of workers. The province is also rich in women's hospitals which can give the preliminary midwifery training. Up to the present, the school has been under the Lady Chelmsford League, Punjab Branch, though it has ample financial help from the provincial government. Now, however, the Government has agreed, subject to the vote of the Legislative Council, to the provincialisation of the School and Staff from April of this year. This means that the whole cost will be met from provincial funds. This is of course a step in the right direction

and is an indication of the interest of the Government in the work of the school and an appreciation of the need of Health Visitors' work.

Bengal Training School for Health Welfare Workers.—The Second Session of the School opened on February 22nd. The School and Hostel were formally opened by the Countess of Lytton, the President, on February 24th. After inspecting the hostel and approving of all arrangements made for the students Lady Lytton gave an address in which she dwelt on the importance of the selection and training of suitable people to become Health Visitors, as the establishment of Welfare Centres was in its infancy and pioneers had to be especially capable.

The number of students for the year was unfortunately very small, being only three of whom one was a private pupil, one of the remaining two has been appointed Matron of the Entally Indian Clinic, Calcutta. The other is being married, but will continue to work as a volunteer. The work done by all three students was of a high character. The School has decided to move into larger quarters as it is felt that if a larger number of students can be accommodated, the expenses of training will not be so disproportionate to the numbers trained. At the same time this increases the expense of renting quarters. The school budget of Rs. 12,000 is met entirely from voluntary funds and it seems a pity that the local Government should not come forward to give the school financial aid. In so large and thickly populated a Presidency the need for Health Visitors must be urgent and provisions for training should not be met entirely from charitable funds.

School for the Training of Health Visitors, Madras.—The course which started in July 1925 was completed in April 1926, when out of six pupils appearing for the examination, four were successful in passing.

In addition to the four schools mentioned above two others undertake the training of Health Visitors which are not aided by the Lady Chelmsford League. These are at Poona and Nagpur. Both places were visited by the P. A. to the Secretary, in July of the year under report, and a brief account of them may be given.

In Poona instruction is given to the nurses while under training at the Sassoon Hospital. These nurses are girls, many of them widows, who have been educated at the Seva Sadan Home in Poona. They live in a hostel near the Hospital. Weekly lectures are given to the nurses on Hygiene and Child Welfare in the evenings. The plea is advanced that the nurses' training is made more interesting by this method, that they learn the prevention of diseases while actually nursing the cases. There may be something in this point of view, but it does not seem an altogether advisable system. The nurses have had a hard day's work, they return tired in the evenings and after dinner have to attend lectures which they can scarcely be fit to enjoy. After the completion of the nursing course some of the nurses are attached to the

child welfare work run by the Seva Sadan Society. Here they attend the Infant Welfare Centres, so called, and do a certain amount of home visiting. In the latter capacity their work resembles rather the work of a district nurse in England than of a Health Visitor, in fact their services are often given to nurse a definite case for some days. The visiting appeared to be rather haphazard and dictated by the calls of the sick rather than directed to maintaining health in infants by regular observation. The same criticism may be made of the work of the centres. They are in reality dispensaries for the treatment of the sick, though by means of milk distribution a certain number of children are induced to attend regularly.

Our feeling is that it would be better to give the nurses a 6 months' course in Health Visitors' training after they have finished the nursing course. Greater efforts should be made to systematise the practical work and conduct it on strictly preventive lines. The number of students available and the enthusiasm of those in charge of the work are very promising for the future of a Health School conducted on the lines indicated. In addition the students have around them in the Seva Sadan, a spirit of social service which should be the greatest asset to them in their future work.

The need for Health Visitors in the Central Provinces has led to the establishment of a training class for the purpose in Nagpur. A few students had previously been sent to the Delhi School, but difficulty was experienced in getting girls to go so far from their homes, and practically none could avail themselves of the English course. Child Welfare work has been started on a more secure basis in the C. P. during the last year. The Central Government have granted the Red Cross Society Rs. 20,000 for the purpose, and that Society has a special Committee to deal with Child Welfare work. As an experimental measure a class which lasted for three months was formed last hot weather in Nagpur. The members were mostly nurses working in the local Hospitals. A second class was begun in November and the course has been revised and lengthened and greater stress laid on practical work. Instruction is given in the vernacular. With careful safeguards it is likely that this school can be made to meet local needs. The problem is not an easy one. The infant mortality rate of the province is very high and the education of girls in a very backward state. The need for workers is thus very great, yet the conditions for obtaining a supply are not fulfilled. Such material as can be obtained must therefore be used. One cannot help, however, stressing the difficulties alluded to above in connection with the employment of vernacular trained students, and pointing out the dangers of placing workers in posts which their education has not fitted them to hold.

2. Work of Centres.—The number directly assisted is small, being confined to places situated otherwise than in Governors' Provinces.

North-West Frontier Province.—The report of the year's work at Dera Ismail Khan is of special interest owing to the fact that Dera Ismail Khan

has become a centre for training dais from the whole province. This is a very interesting and important scheme and has great possibilities. The provincial government has built and equipped quarters for the residence of the dais which are attached to the Health Visitor's quarters and close to the Zenana Hospital. The dais are granted stipends by the localities which send them. These stipends are distributed as follows: Rs. 15 to the dai herself for maintenance and Rs. 5 each to the Zenana Hospital and Child Welfare Centre. The course lasts six months. Lectures are given five times a week by the Lady Health Visitor and arrangements have been made for the dais to conduct some of their cases in the Hospital under the supervision of the doctor or Matron. The city dais have agreed to take the pupils to cases in the city also, on payment of a small fee. At present 11 dais are under training under this scheme, who will appear for their examination in April. Provided the dais can put into practice what they have learned, and keep up their standards of cleanliness and non-interference, they should prove a great boon to the places where they work. Ultimately, however, we feel sure that some system of inspection will have to be devised to supervise the work of these dais.

Apart from this new piece of work, the former activities have been continued. The city work has greatly increased. The great majority of confinement cases are now reported to the Health Visitor or take place in hospital. This has meant a great increase of the work of inspection, and also in teaching the dais. 15 dais appeared for the P. C. M. B. examination in April of whom 14 were successful. In addition the Infant Welfare Committee was approached by the military officers to arrange for the Health Visitor to visit the Military Lines and supervise confinement cases there. This was done, but it has been found that many of the cases have no dai, but are confined with the help of a neighbouring woman, usually ancient. The increase in the work along these lines led to the opening of the Infant Welfare Centre on two days a week only instead of five. The numbers therefore show a decrease on the former years, but it is satisfactory to note that the proportion of revisits is greater than previously. In October an Assistant Health Visitor was sent to Dera Ismail Khan so that now the Centre is open daily.

The report thus shows excellent progress, along sound lines.

The work at *Peshawar* is still in abeyance, but we hope it will not be long before it can be re-opened.

Simla.—Under the energetic direction of the Medical Officer of Health, the work at Simla grows and flourishes, in fact it is rapidly becoming greater in amount than the staff can cope with. If further developments, which are planned, and which are certainly necessary, are to take place, the staff must be increased. The Municipality sanctioned the employment of a Maternity Supervisor from April last, and after some difficulty a suitable person was found. She found the work too arduous however and left in July. The experience proved, however, that a Maternity Supervisor is essential to the

work; she relieves the Lady Health Visitors of maternity work which is otherwise a constant interruption to their regular visiting.

The maternity work of Simla is now largely in the hands of the Infant Welfare Centre, but in order that a high standard of work may be continued, supervision of the dais' work is very necessary. In addition a number of dais are still under training and must conduct cases under supervision. It is impossible for the present staff to carry on this work in addition to their other duties.

Not only does the maternity work continue to grow, but fresh developments have been made with regard to centre work.

Two subsidiary centres have been opened, one at Nabha Estate and one at Chota Simla, and it is planned to open three more. These centres open weekly and a trained dai lives near each, and can carry out maternity work in the neighbourhood. The opening of such subsidiary centres is a very important piece of work. The distances in Simla are so great that it is impossible for many women to visit the main centre; they cannot afford the time, or the rickshaw hire to come. The Health Visitor must come to them and the best way in which this can be accomplished is for clinics to be held at which a larger number of children can be seen than is possible in home visiting.

Other features of the work of the year were: The establishment of a dais' social club, the object of which is to bring the dais together, promote friendly intercourse, secure co-operation among the dais. It holds monthly meetings and is a most useful educative influence.—The holding of health and baby week for the first time in Simla. It proved quite successful. A small exhibition was held in the hall of the centre, lectures were organised, and cinemas shown. A baby competition, carefully organised, was also held, which was very popular. Her Excellency Lady Irwin gave away the prizes at the conclusion. Lastly, the Municipality have set aside a small sum of money to be used in payment of fees to doctors called in when necessary to attend difficult cases where no fee can be given. Considering how recently this reform has been achieved in England the Municipality may congratulate itself on making this provision at such an early date.

Rajputana.—The work of the branch here seems to be in a satisfactory state. Two of the Indian States have Health Visitors who run welfare centres and teach dais, and in three others classes for dais are held. In Beawar, a town where there are several cotton mills, weekly meetings for women were held at the mills at the meal hour. They have proved so popular that the "Seths" have guaranteed the salary of a Health Visitor for three years. This is very encouraging. Monthly talks were also given at Kekri. In Nasirabad three centres are carried on, one for British soldiers' wives, one for Indian soldiers' wives and one in the city, and the Cantonment Magistrate

has offered to finance a "Baby Day." In Ajmer two new centres have been opened, one for the railway employees wives and another for Indian soldiers wives. In addition the systematic visitation of the homes has begun.

Bangalore.—The work of the Child Welfare Association is assisted by both the Lady Chelmsford League and the Victoria Memorial Scholarship Fund and the two activities are not separated. The "Apear Antenatal Wards" mentioned in the previous report continue to do good work. Half a dozen women, in advanced pregnancy and of the poorest classes are provided with a night's rest and suitable diet. The actual confinements take place in the Maternity Hospital. The antenatal clinic and nursery at the Tobacco factory are well patronised by mothers and infants. Scholarships to two pupil midwives were again granted for training at the Lady Curzon Hospital. A special midwife for propaganda work in selected slum areas was appointed in October, the object being to bring home to the people in such areas where the untrained dais still have influence, the dangers of quack midwifery and the importance of birth registration, vaccination and post natal care. This work is carefully supervised by the District Lady Health Visitor.

Branches of the League exist in three Governors' Provinces and it seems suitable to notice their work though they do not now receive financial aid from the League except for the purpose of training Health Visitors. **Provincial Branches.**

Madras.—Reports the opening of eight new centres and the further development of work throughout the Presidency except in Ganjam. Public interest is increasingly manifest. There are ten centres in Madras itself under the Maternity and Child Welfare Association and forty-nine in the mofussil, thirty in municipal towns. Trained Health Visitors have been sent from the school in Madras to work in mofussil stations.

The Punjab Branch shows great activity in spite of a somewhat precarious financial condition. We hope that a solution may be found to the latter problem and that the work may continue to flourish. The local interest appears to be very keen. This is partly accounted for by the personal visits of the Organising Secretary. When visiting a place, usually the headquarters of a district, she addresses meetings of women as well as of the public and also in girls' and boys' schools. Six new centres were opened during the year. The Government has decided to give grants in aid to Maternity and Child Welfare schemes in rural areas, but this decision is subject to the vote of the Legislative Council. If this is passed it will be of course a great assistance to the local authorities and encourage them to take up the work.

United Provinces Branch.—In this branch also new work is opening up in many districts. The difficulty is to provide them with suitable workers. The province is backward in education and finds it hard to send educated candidates for training. The Lucknow branch has done good work under a fully qualified doctor who keeps the work on strictly preventive lines. Elsewhere there is a tendency for too much treatment to be done. The public

needs educating in these matters, and this is being slowly accomplished by the propaganda of the travelling exhibition and the holding of baby weeks. The organising secretary does much travelling and devotes much energy to the work.

In our last year's report it was mentioned that an attempt was being made to compile a full list of child welfare centres throughout India. Forms for filling up have been issued to many centres and a good deal of valuable information thus obtained. The information is not yet complete, but it is hoped that it may be so in a year or two and it is a valuable record of the work. One thing emerges quite clearly and that is the differences in the amount of work undertaken by the various provinces. Bengal, Assam, the C. P. and N. W. F. P. show very little work, while Madras, the United Provinces and the Punjab have good records. In Bombay Presidency the work is directed towards help during childbirth rather than actual Infant Welfare work. The quality of the work varies also from place to place, the standard being decidedly high in some places whilst very poor in others.

3. Propaganda.—The *Travelling Exhibition* visited Lucknow, Kolhapur, Sholapur, Pandurpur, Jhind, Patiala, Kapurthala, Bannu, Gurdaspur and Jullunder in the winter and spring, and spent a whole month touring Sialkot district in May. In spite of the difficulties of the season of the year, the tour was very successful. During two months of the hot weather and rains, Mrs. Bellew was lent to Titaghur to allow the Health Visitor to have a much needed holiday. As requests for the exhibition were very few in number it was decided to lend the services of Mrs. Bellew to Jodhpur State to organise Child Welfare work there. No doubt an increased demand for the Exhibition will be forthcoming again later on.

Publications.—Several new editions of former publications were called for and in addition the following were issued: A leaflet explaining the objects of the Lady Chelmsford League, weight charts for infants, a pamphlet, illustrated, "The Father's part in the child welfare movement", and three more Health Dialogues, dealing respectively with the "Care of Infants", Food and Drink, and General Hygiene, were published. A new poster "Where There's Dirt, There's Danger" adapted by permission from the one published by the Health and Cleanliness Council was issued in two colours in English, Urdu and Hindi. The quarterly Journal was issued as usual.

The demand for literature is steady though not vast in amount. The stimulus due to Baby Week has to some extent died down, but this was only to be expected and need not depress us. At the same time more could undoubtedly be done in the spread of knowledge by means of literature. Many are eager to buy were the right sellers urging the purchase.

The Record Forms published by the League have been much appreciated and are being more and more used throughout India. This is very satis-

factory as it means a certain degree of uniformity as well as the collection of much useful information.

In the summer of 1926 the preparation of a new film was considered. The project was carried out in Delhi in November, and has been very successful. The new film illustrates Child Welfare work as actually in operation in Delhi. Its reality therefore carries conviction in a way that set scenes or compositions could not do, and it should be of great assistance all over India in indicating how work may be carried on in approved methods.

The use of the cinema for propaganda could be carried much further than is at present the case. It is exceedingly popular among both literate and illiterate people and lessons can be readily taught through its use. What hinders the preparation of a greater number of films is the great cost of production. Not only is the actual photography expensive, but a great deal of thought and time has to be expended on the preparation of the subject. If this is not done the film may be wasted and the expense of photography has to be incurred once more. We are often asked why more films are not available. It is certainly not from lack of belief in the method, but from lack of money and staff to undertake the work.

Perhaps the most important piece of propaganda undertaken by the League in the year under report is the preparation for an all-India Maternity and Child Welfare Conference. This Conference will be held in February of 1927 and much thought and care have been devoted to it. Delegates are expected from all parts of India and a comprehensive programme has been drawn up. If the Conference is successful in the best sense of the word it should mean a great stimulus to Child Welfare work throughout India.

THE LADY CHELMSFORD ALL-INDIA LEAGUE.

The Annual Accounts and the Statement of the Closing Balance of the Fund will be found in Annexures I & II to this chapter.

2. It will be seen that the interest has amounted to almost exactly Rs. 53,500. The donations and subscriptions have amounted to over Rs. 9,000 which includes Rs. 7,000 received from Her Excellency Lady Reading towards pay of Miss Graham of the Lady Reading Health School and also a donation of Rs. 800 from the Indian Red Cross Society towards the cost of a cinema machine. The usual contribution of Rs. 6,000 was received from the Government of India for the Delhi Health School as also the normal contribution of Rs. 3,250 from the Victoria Memorial Scholarships Fund for exhibition and propaganda expenses. The remaining receipts of about Rs. 6,000 include besides miscellaneous receipts a sum of over Rs. 3,000 realised from the sale of publications and a little over Rs. 1,000 from the various provinces on account of half the cost of the Travelling Exhibition.

3. On the expenditure side, the share of Central Office expenses debitable to the League came to Rs. 12,800. For propaganda, which included the travelling exhibition, publication and Baby Week, over Rs. 21,200 was spent which includes expenditure amounting to over Rs. 5,500 on the important object of the preparation of a Cinema film. In areas outside Governors' Provinces, the expenditure came to about Rs. 19,000. In Governors' Provinces, grants amounting to Rs. 13,500 were made to Provincial Branches in Madras, Bengal and the Punjab. A sum of Rs. 30,000 was paid during the year into Colonel Walker's Charity Account for utilisation in connection with the new building of the Health School. Miscellaneous expenditure amounted to a little over Rs. 1,200.

4. The important features of the Statement of Closing Balance are :—

- (a) A reduction in cash balance from about Rs. 46,000 to about Rs. 16,000, mainly due to the special grant of Rs. 30,000 towards the cost of the new Health School referred to above.
- (b) An increase of about Rs. 10,000 in investments.
- (c) An improvement in assets of about Rs. 1,25,000 being the cost up to date of the buildings and equipment of the Lady Reading Health School and the Infant Welfare Centre for the maintenance of which the League has assumed responsibility.

ANNEX

Annual Account of the Lady Chelmsford All-India League

RECEIPTS.

Items.	Receipts, 1926.			Budget, 1926.
	Rs.	A.	P.	Rs.
1. Opening Balance—				
	Rs.	A.	P.	
Investments	8,67,836	2	3	
Furniture	2,405	0	0	
Cash	45,673	5	3	
	9,15,914	7	6	34,800
2. Interest on Investments	53,419	13	2	53,500
3. Donations and subscriptions—				
(a) From Her Excellency towards pay of Miss Graham up to 31st December 1927, as Superintendent, Dais Class, Lady Reading Health School.	7,000	0	0	...
(b) From the Indian Red Cross Society towards the cost of a cinema machine.	800	0	0	...
(c) Other items	1,385	9	8	750
4. Contributions—				
(a) From the Government of India for the Delhi Health School .	6,000	0	0	6,000
(b) From the Victoria Memorial Scholarships Fund for Propaganda	3,250	0	0	3,250
5. Sale proceeds of Publications	3,150	15	4	4,500
6. Amount received from the various Provinces on account of half the cost of the Travelling Exhibition.	1,060	12	3	1,000
7. Miscellaneous—				
	Rs.	A.	P.	
(a) Refund of stipends	1,420	13	0	..
(b) Other items	100	0	0	..
	1,520	13	0	
8. Adjustment on account of cost of buildings of the Lady Reading Health School and the Infant Welfare Centre with costs on equipment.	1,25,129	9	2	
TOTAL Rs. .	11,18,712	0	1	1,03,800

URE II.

Fund (including that of the Health School, Delhi), 1926.

EXPENDITURE.

Items.	Expenditure, 1926.			Budget, 1926. Rs.
	RS.	A.	P.	
1. Contribution to the Countess of Dufferin's Fund towards Central Office expenses.	12,800	0	0	12,800
2. Propaganda—				
(a) Staff of Exhibition and upkeep	4,291	10	0	6,400
(b) Travelling expenses of Exhibition and Staff	2,320	2	0	2,400
(c) (i) Publications	4,099	2	3	5,000
(ii) Film	5,557	5	0	...
(d) Baby Week	5,000	0	0	5,000
3. Expenditure in other than Governors' Provinces—				
(a) Delhi	245	7	9	3,000
(b) North-West Frontier Province	600	0	0	600
(c) Rajputana	1,800	0	0	1,800
(d) Bangalore	1,200	0	0	600
(e) Simla	600	0	0	600
4. Grants-in-aid in Governors' Provinces—				
(a) Madras Health School	4,000	0	0	4,000
(b) Bengal	6,000	0	0	6,000
(c) Punjab	3,500	0	0	3,500
5. Expenditure of the Delhi Health School	14,500	2	6	14,600
6. Amount paid into "Lt.-Col. J. Norman Walker Charity Account" .	30,000	0	0	30,000
7. Miscellaneous—				
(a) Stipend, prizes, etc.	667	8	0	930
(b) Sonapur Medal	...			70
(c) Other items	300	3	9	500
(d) 10% depreciation on furniture	240	8	0	..
	97,722	1	3	97,800
Closing Balance as per statement attached .	10,20,980	14	10	6,000
TOTAL Rs. .	11,18,712	0	1	1,03,800

Examined and found correct.

PRICE, WATERHOUSE, PEAT & Co.,

Chartered Accountants,

CAWNPORE :

4th March 1927.

M. F. GAUNTLETT,

Honorary Treasurer.

Auditors.

1934

THE LIFE HISTORY OF THE HOUSEFLY, *MUSCA DOMESTICA* L.

BY J. H. KROMBEIN

STAGE	DURATION	TEMPERATURE	RELATIVE HUMIDITY	FOOD	REMARKS
Egg	1-2 days	70-80° F.	50-60%	None	Laid in clusters of 100-200
1st larva	3-5 days	70-80° F.	50-60%	Decayed organic matter	Feeds on decaying matter
2nd larva	3-5 days	70-80° F.	50-60%	Decayed organic matter	Feeds on decaying matter
3rd larva	3-5 days	70-80° F.	50-60%	Decayed organic matter	Feeds on decaying matter
Pupa	5-7 days	70-80° F.	50-60%	Decayed organic matter	Burrows into soil
Adult	1-2 days	70-80° F.	50-60%	Decayed organic matter	Lives for 1-2 weeks

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