

dispensaries; (c) the provision of female medical officers and attendants for existing female wards; (d) and the founding of hospitals for women where special funds or endowments are forthcoming.

"III. *The Supply of Trained Female Nurses and Midwives* for women and children in hospitals and private houses."

This, practically, is a medical service for women exactly the counterpart of the Government's system of medical provision for men which has obtained all over India, and is purely a secular, though certainly a benevolent enterprise. It will not hinder and may help medical missionary work indirectly. But if any young Christian women, graduated in medicine or as nurses, zealous to do evangelistic work in connection with their profession, think of responding to the demand for persons skilled and trained for medical work in the Dufferin system, we must caution them against so doing without carefully weighing the rule of that association which says, "*No employee of the Association will be allowed to proselytize, or interfere in any way with the religious beliefs of any section of the people.*" If this does not absolutely debar them from speaking on religious subjects to their patients, and practically from carrying the gospel to hospitals or homes, it is not easy to discover how the English language can be made to inhibit such deeds.

We in nowise depreciate the countess' scheme for the relief of suffering, but from the distinctively missionary stand-point it is not an arena affording scope for the medical missionary. Dr. Sarah Seward was engaged as a medical missionary at Allahabad, India, and lent her aid for awhile to the countess' association, but withdrew from it, and said, through *Woman's Work for Women*:

"I gave up the Dufferin work in October (1887); they could not hamper me, as I was distinctly promised that I should not be fettered, but they wanted that all assistants paid by them should come under the non-

religion clause, so, as soon as I could do it quietly, I closed it up."

The Indian Witness says, "There was not the slightest use for the Indian Association or Lady Dufferin's committee introducing the clause they did"; and *Medical Missions at Home and Abroad* asks, "Why this never-ending fear on the part of our Indian Government to acknowledge essential Christian rights, the right of Christian missions, the right of individual Christian confession?" "May a Christian," it asks, "come under any such bond? May a Christian woman say, 'I promise that, working among dying women, my lips shall never be opened to offer them, in Christ's name, the gift of eternal life?'"

The greater anomaly here arises from the fact that this movement derived its initial inspiration, ensample and hope of possible success, from Christian medical missions by women to women, and these had met with no obstacle on account of religion, but were successful to such extent that they were not equal to the demands made on them. Woman's medical work among heathen women is distinctly and divinely Christian, and yet this association divorces it from its acknowledged source.

A Great Obstacle in India Removed.

It is with unusual gratification that we learn that the British Government is to discontinue its relation with a system of camp-regulated licentiousness in India. It is some time since the moral sense of Great Britain rose in its might and condemned the Government system of licensed lust that had obtained in the British Isles. But the State regulation of this iniquity was not discontinued in the army of India; and it has recently been exposed as singularly monstrous, facts having been brought to the knowledge of the Christian public of England which have exasperated them intensely.