

removal of tonsils or adenoids. That involves very little trouble to the parents, and is besides by way of being fashionable, and has proved of benefit to neighboring children. But an operation is the first part of the treatment, not the end of the treatment. A child operated upon needs medical supervision and careful training before it may be pronounced cured. And this supervision and training it does not get.

The case cited above is by no means an especially bad case; it may even be thought to belong to the aristocracy of the poverty group. The case is still possible to treat by the united effort of school nurse, school teachers, school doctor, dispensary doctor, with the casual intervention of the clergyman, the district visitor, and a member of the Children's Care Committee. But there are many cases beyond these agencies. There is (I take examples at random as they occur to me from my own experience) the case of the blind woman, a widow, with verminous and ringworm-smitten children. Medical treatment comes and goes, according to the aberrations of the patient, but the conditions persist. To expostulate with such a mother for sewing her child's clothing tightly upon its back is to get a glib explanation (glaringly denied by obvious conditions) that this is done regularly after the equally regular bath. Nevertheless, however glaringly obvious the condition, the cure is not obvious under existing circumstances. To give a complete outfit of clean clothes is no remedy, it has been tried more than once and failed.

Another case is that of a child attending a school for mental defectives. The school nurse noticed the discharging ears, and managed, after considerable trouble with minor arrangements, to get the child specially medically examined. At the examination the mother stated that the child was "under treatment." This, it appeared, meant one attendance in six weeks at a hospital out-patient department, where she was given some lotion and some rapid and half-comprehended instructions. The mother then consented for a special arrangement to be made whereby the child was to be sent from school to a public dispensary every day, in order that the ears might be properly syringed out and

attended to by a nurse. The school doctor gave the mother a letter for the school teacher to the effect that the mother agreed to this, to be given to the school teacher by the child. Three days afterwards a teacher called on the dispensary doctor to inquire when treatment might begin, as she had heard about it from the nurse. It then appeared that the letter had not been delivered. Another teacher then visited the child's home and secured the school doctor's letter—"it had been forgotten." After this the child attended at the dispensary most days, but never on Saturdays, when it "minded the baby." As soon as the summer vacation began the child also ceased attending. No doubt by now the ears, which were in a most exceedingly serious and foul condition, are just as bad as they ever were. And the measures taken to get the treatment were all quite independent of numerous official letters and inquiries about the child, involving the labor of clerks and other officials on a fruitless task.

And even when this great, and compared with the results, disproportionate exertion, such a child has been cured of one definite ailment, it very often presents another. Frequently a poverty group child shows more than one defect, often several defects, and the cure of one may leave the other unaffected. And the cure of all definite ailments may still leave the groundwork of anæmia and a debilitated constitution unaffected. To get a poverty group child into a good state of health often involves prolonged, and expensive, treatment, one or more operations, on ear, glands in the neck, tonsils or adenoids, a stay in hospital and at a convalescent home and perhaps a prolonged three to six months' holiday in some country cottage. All of which mean much money and very much expenditure of time and energy.

To continue the present methods of dealing with the poverty group children is to perpetuate the diseases and defects from which they suffer. Nothing but a special organization to meet the special case will be of any great service. What is done at present is of immense help in ameliorating conditions, in easing pain, in keeping the worst conditions from spreading too widely; but what is done at present is costly, cumbrous, involves