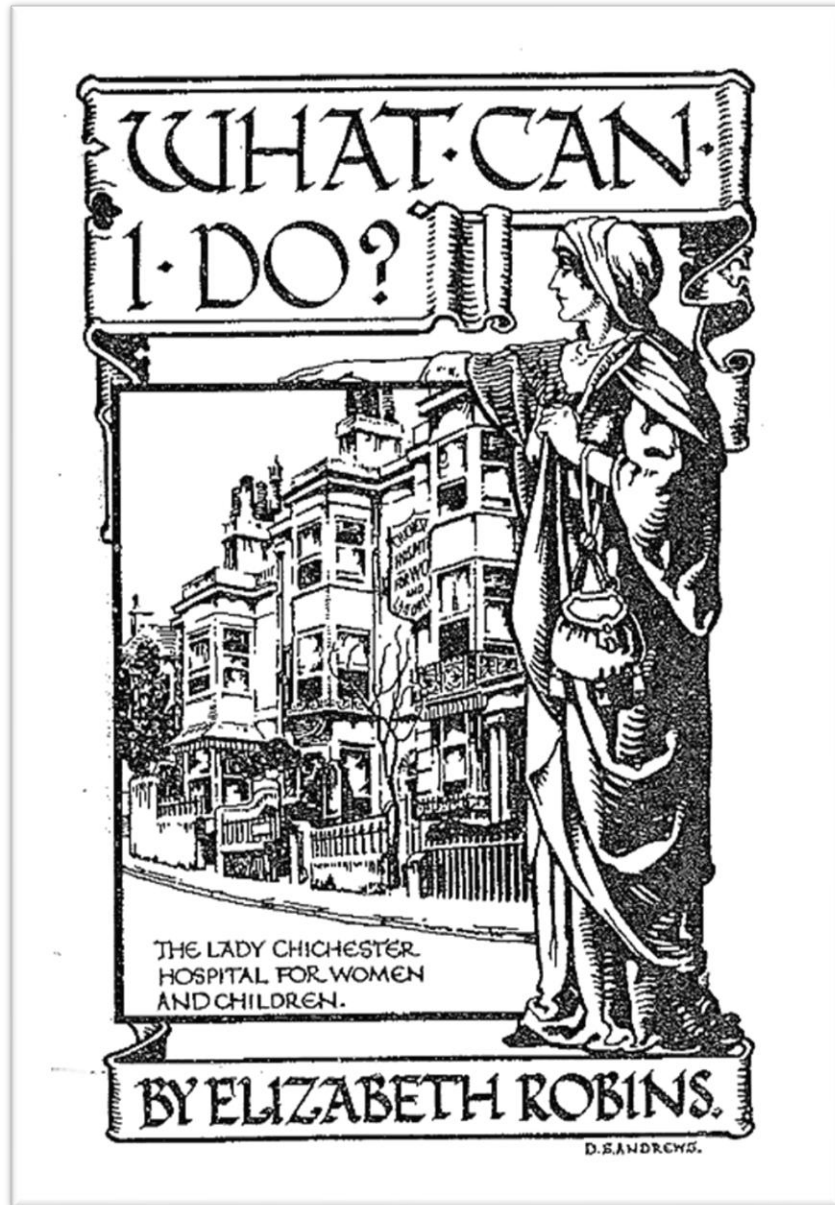


What Can I Do?

The Lady Chichester Hospital for
Women and Children

[A pamphlet by] Elizabeth Robins



What Can I Do?

[From a copy of the original, housed in what was the Fawcett Library, now at the London School of Economics. As far as I can determine, this is not in their online database. It was provided as a xerox from the original at the time of my visit in 1985. Angela John mentions the pamphlet, and Sue Thomas records it as item 222. Though listed last in Thomas' Pamphlet section because it is undated, it is clear from the context that the date is 1914. ER is composing the pamphlet as the council between the King and his statesmen are meeting to deciding on a war resolution. War was officially declared on August 4, 1914. ER's reference to the recent death of a friend of the hospital would have been to the death that March of Louisa Martindale, 1839-1914, mother of Dr. Louisa Martindale, 1872-1966, both of whom were known personally to Robins. The pamphlet is a testimony to ER's lifelong commitment to promoting better health care for women, by women professionals. This culminated in her support of Octavia Wilberforce while she obtained her medical education and in bequeathing her home, Backsettown, in Henfield, to become a rest haven for women.

Within a year of the war's outbreak, Robins would be involved in the formation of the library at Endell Street Hospital, a war-time hospital organized and staffed entirely by women. ER at the time of her composition was residing with the Bells, and her good friend Lady Florence Bell administered the war-time hospital from the Village Hall, Rounton Grange (North Riding Voluntary Aid Detachment.)

Robins would also assist with the 1919-1920 appeal for funds when the New Sussex Hospital for Women and Children succeeded the Lady Chichester. Biographies of Doctors Louisa Martindale, Helen Boyle and Sophia Jex-Blake (the latter two mentioned here) and the Endell Street administrators Doctors Flora Murray and Louisa Garrett Anderson provide enlightening information about the history of women's medicine. See the conclusion of the text for imaged pages not included in this transcription. This text retains English spelling, and (in material quoted from the times of Henry V and Henry VIII), the archaic spelling from the original. --JEG]

What Can I Do?

In communications to the Press, and in private letters, this question, to the country's honour, is the one heard oftenest in these anxious days.

The passionate desire to help leads many women to give themselves or their purses to some form of Relief Work. It is to a form of Relief Work I am asked to draw attention. It is not the form (I admit at once) which is most exciting, most popular, or which makes the most resounding appeal. So great is the joy of helping in an unprecedented National crisis that some of those true soldiers who habitually stand closest to the great struggle with disease and death, have wondered whether, in the midst of all this picturesque excitement, the small drab claims can be remembered. If we think they can and will, we are paying our tribute, too, to the character of a people.

The pressure of the Great War will come hardest on the very class for whose succour a little outpatient Dispensary was opened some years ago in Brighton, which, owing to its success, has been twice enlarged to admit in-patients, and is still taxed beyond its capacity. One of the most generous friends of this institution ("The Lady Chichester Hospital for Women and Children") has recently died, and I was asked to set down the grounds upon which an appeal should be made for help to carry on the work. I was attempting this under certain disabilities, the greatest being that which also most gravely menaces

the Hospital -- an immense preoccupation about the war Germany had declared a couple of days before.

In the midst of my note making, I looked out from my window in a house in a great Northern town on the morning when the Council of the King and his Ministers was to renew its sitting in London. My thoughts deserted the hospital to wonder: What are they deciding -- that little group of people in London? what momentous counsel is being given and received? As I stood there thinking of what was at stake for millions of our fellow-creatures, and picturing still the Council of King and Statesmen, I was conscious of a council being held in the street, almost opposite my window.

It was a conference of women; six or seven, ranging in age from twenty odd to fifty. Each had a capacious market-basket on her arm, and the baskets were empty, as you could see by the way they were held. These women had met on their way to buy the family supplies (Bank Holiday does not affect the shops in Scotland) upon that day of panic, when prices had leaped up, and some shops were refusing orders. The women were all bending forward in their earnestness (on any lighter-hearted morning, one would have smiled at the almost mathematical symmetry of the group), their heads as close together as though they were tied by the neck in a bunch, and, between each couple, a tilted market-basket bulging out, bottom upward.

They stood long so, holding *their* council -- what would feed the family best, and where to go for it? -- till one woman, either ill or heartsick, broke the circle and leaned against the wall.

If the Great Council in London had carried my thoughts away, the little council in the northern street brought them back. There will be many such councils in the days we are facing, and some of the women will go to the wall.

A Hospital like the Lady Chichester is a friend to such people. But, you may say, we are always being asked to help hospitals; we cannot give to all.

The question is: *To which shall we give first?*

I should say to that which fulfills the following conditions: --

1. It shall, in one way or another, serve a section of the public not provided for by other hospitals.
2. Its skilled and economical conduct shall be assured by some knowledge of the character and devotion of those in charge.
3. It shall make its prior claim on our sympathy and resources by reason of being an institution of proved value and efficiency, which, as yet, has had less chance than others of making its needs known. -- less chance, therefore, of sharing the help of that wider circle of persons disposed to aid such work.

I shall hope in the following pages, to show that these conditions are fulfilled by the "Lady Chichester."

From the days when it treated and dispensed for out-patients only, and occupied one small house, the fact that it was much sought by the poorer inhabitants of the quarter showed its usefulness from the beginning --

especially as a small fee was charged here, as against gratis treatment to be obtained elsewhere. Why did people, to whom a penny is no negligible sum, prefer to pay 3d. again and again in Ditchling Road, rather than go to a free hospital?

The reason would not be far to seek, after the population came to know the doctors in charge. But, before the doctors were well known, what brought people in such numbers to the Lady Chichester doors? I shall give the main reason last, and record first the minor causes. No "letters" are necessary preliminaries to treatment here. Consequently, there is no wearisome waiting. Even now, when the growth of the enterprise provides accommodation for in-patients, letters are not necessary. The first patient on the long waiting list is admitted as soon as there is a vacant bed.

Another reason is, beyond doubt, the strikingly cheerful impression given by the place. With all the order and discipline, the highly skilled service, medical, surgical and nursing, one is struck by the total absence of that atmosphere of grim institutionalism which lowers the spirits in many a hospital. It is easy to see why the out-patients bide their time here willingly, and seem so much at home that they were said by someone to look on the waiting-room as a kind of cheerful "club" -- surely a better spirit than the strained apprehension we have read on the faces of many of the ailing poor waiting their turn elsewhere. Several in-patients have volunteered the information that their stay in the Lady Chichester hospital has been the happiest time of their life.

Finally, the reason which seems beyond a doubt to account for the instant and the steadily-increasing success

of this little Hospital, is that women and children are treated here by women doctors -- a service not obtainable by the poor in all the South of England, save at the little house in Ditchling Road and its allied establishment in Hove.*

*For treatment of nervous disease under the direction of Dr. Helen Boyle.

Women who remember their own shrinking (especially in youth) from talking about or hearing talked about certain bodily ailments before the opposite sex, will not wonder at women's preference for treatment by women.

The world does not yet recognize at what cost to women and girls the natural feelings in this connection are set aside. Few of us but have known members of our own sex who have put off dangerously late consultation as to some malady which would have been confided in its early stages had a woman doctor been at hand. I have heard more than one practitioner say that when she asked some sufferer from a trouble of longstanding what remedy had already been tried, the patient had confessed that she had never before told her more significant symptoms -- an unfairness to the man-doctor as obvious as it is unavoidable. I leave for others to estimate the blunting of feeling and the loss of sex reserve in certain cases where ignorant, pain-driven girls are compelled by the force of an unnatural custom to reveal to the first available medical man matters of extreme delicacy.

Lest some possible supporter may be dissuaded by the very fact which constitutes this Hospital's chief claim on many an ailing woman, we ought, perhaps, to remind

the general public anew that the treatment of women by women is in accordance, not alone with the dictates of Nature, but with ancient and long-accepted practice. Doctor Jex-Blake tells us that from the time of Moses, one most important, if not the most important, branch of the profession, has been mainly in the hands of women.

"In 1760, Mrs. Nikell, a midwife, declares her "insuppressible indignation at the pernicious innovations.... sillily fostering a preference of men to women in the practice of midwifery; a preference first admitted by credulous fear.... upon this so suspicious recommendation of those interested to make this fear subservient to their ends."

We learn, some of us to our great surprise, that Queen Victoria was the first Queen to be attended by a man-midwife; that she herself was ushered into the world by the same famous accoucheuse who had performed the like office at the birth of the Prince Consort.

With reference to women's practice in the past of medicine in all its branches, Brongrand states that the most ancient document extant (1311) relative to the organisation of surgery in France, forbids the practice of surgeons and of female surgeons who had failed to pass a satisfactory examination before the proper authorities.

References to female surgeons appear again in an edict of King John in 1352, showing that women practised in England at the time with full legal authority.

An interesting and significant reference is made by Doctor Jex-Blake to the early objection against women doctors not by patients or general public, but by men doctors only. In 1421, she tells us, a petition was

represented to Henry V, praying that "no woman use the practyse of fisyk under payne of long emprisonment." Within a few years after the first incorporation of the College of Physicians and Surgeons, an Act (34. Henry VIII., 8) was passed for the relief and protection of "Divers honest psones, *as well men as women*, whom God hath endued with the knowledge of the nature, kind and operacon of certayne herbs, rotes and waters, and the using and ministering them to such as be payned, with customable diseases, for neighbourhode and Godde's sake and of pitie and charytie," because the "Compaine and Fellowship of Surgeons of London, mynding onlie their owne lucre and nothing the profit or ease of the diseased or patient, have sued, vexed and troubled" the aforesaid "honest psones," who were henceforth to be "allowed to practyse, use, and minister in and to any outward sore, swelling, or disease, any herbes, oyntements, bathes, pultes or emplasters, according to their learning, experience and knowledge, without sute, vexation, penaltie or losse of their goods."

Doctor Jex-Blake was told by a friend that Archbishop Manning, when expressing to her his strong interest in the question of the medical education of women, instanced the sufferings of nuns, to whose sense "it would be little short of profanation to submit to some kinds of medical treatment from a man." "Nor, surely," adds the wise doctor, "need sympathy in such cases be limited within the bounds of any religious denomination."

She further tells us that while studying in Edinburgh, a certain doctor published eight letters in one week to prove that "ninety-nine out of every hundred Englishwomen suffering from female diseases freely

consulted medical men. During that very week no less than three women in different classes of society appealed to me for advice and treatment for sufferings about which they, 'did not like to ask a gentleman.' In each case I advised him to consult a medical man, as I was not yet myself in practice, and there were no women doctors in Edinburgh; but in each case I found that their feeling in the matter was too strong to allow them to do so."

Doctor Mackenzie, of Inverness, says: "Every medical man must confess that he is often merely able to hint as to information he requires from his female patients, and, consequently, for want of plain questions and answers, which a lady M.D. would at once ask and receive, frequently mistakes and mistreats a case. Having been a physician and surgeon for nearly fifty years, I state as a thoroughly well-known, undeniable fact, that great numbers of women are sickly for life, and die simply because they shrink from speaking of their ailments to men.

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Whatever opinion is entertained about this, few will care openly to declare that women and girls should be prevented from consulting qualified women, if they prefer to. The real test of women's minds in this matter seems to us to be provided by the history of the Hospital for which we make this appeal. We find an eloquence beyond all words in the fact that the opportunity presented by the "Lady Chichester" is eagerly embraced, in spite of the weight of exclusive authority acquired by the opposite sex, through confining the practice of medicine so long to men. Well-to-do women can, and increasingly do, solve this question for themselves. The "Lady Chichester" would put

this power increasingly in the way of the poor professional or middle-class working woman, who cannot afford the expensive nursing home, and either is not eligible for the ordinary hospital or prefers to pay a sum commensurate with her means in order to secure privacy and the special comforts of the "Lady Chichester." These include bright, sunny rooms, pleasantly furnished; Lawson Tait beds, enamel and glass lockers, electric bells to every bed, and, to every bed, electric light switches. The little operating theatre is perfect of its kind, and all surgical cases have up to this time healed by first intention.

If the second and third of the reasons why the Hospital should be supported, are not fully substantiated by the foregoing – or, indeed in any case -- let those interested in the medical service to women and children come and see the Hospital for themselves. Those who cannot do so, and who yet follow the public-spirited work done by the County of Sussex, will find a guarantee among the names on the Council, in that of the Countess of Chichester, its President; in Miss Verrall, the Vice-President, and, notably, in the Hon. Medical Officers. Visitors will find that three evenings, as well as three afternoons a week are given up to out-patients. The evenings are the more popular among the very poor women. By coming then their daily work is not interfered with by attention to that item, often last to be considered, the health of the mother of the family, upon whose medical needs recent legislation has all unwittingly shed a sobering light.

And so, not forgetting the uninsured casual "maid," the poor professional woman, the many children, and all the army of unmarried, unpaid home-workers, I come back

to the mother with the empty basket on her arm, the woman we are most concerned shall not go to the wall for lack of a little timely aid. To support this form of Relief Work, only £300 a year is now necessary. Will some of those who are asking, "What can I do?" give annual subscriptions sufficient to make up this amount?

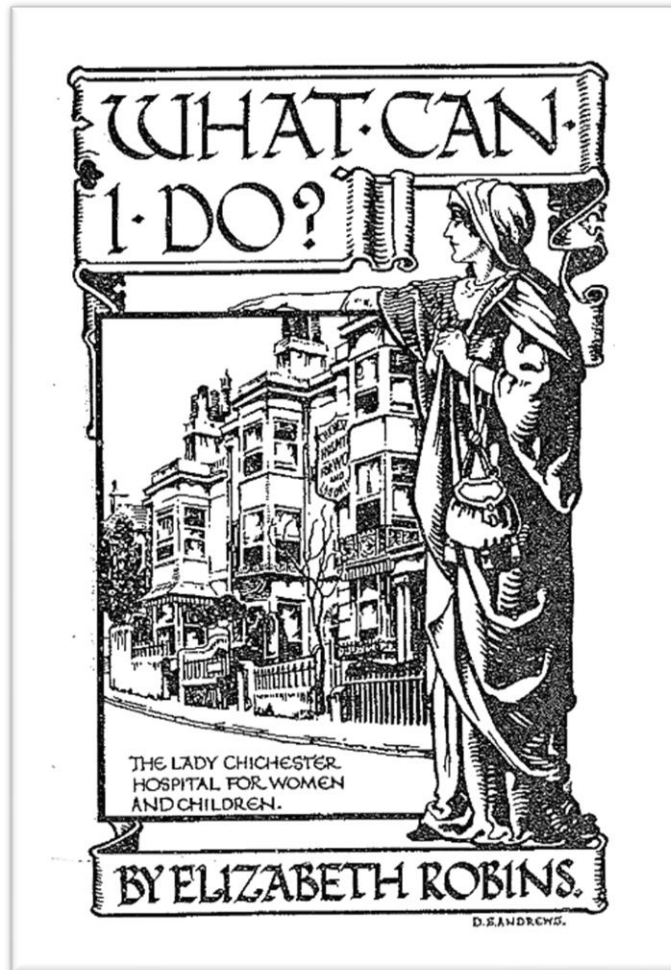
ELIZABETH ROBINS.

[Original text is on eight pages, with numbering on pages 2-8 and the first page opposite the title graphic un-numbered.]

Also, following the text and reproduced on the following pages, are graphics of the Hospital organizational structure and a form for donations.

Another copy is at the Fales Library, NYU, Elizabeth Robins Papers: Box 254, Folder 12.

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The Lady Chichester Hospital,

-4, 6, & 8, DITCHLING-ROAD,
BRIGHTON.

Consulting Surgeon :

Miss ALDRICH-BLAKE, M.S., M.D.
(Senior Surgeon, New Hospital for Women, London.)

Visiting Physicians :

Miss MARTINDALE, M.D., B.S. (Lond.),
10, Marlborough Place, Brighton.
(Senior Physician and Surgeon.)

Mrs. SCATLIFF, M.B.,

11, Charlotte Street, Brighton.
(Physician and Anæsthetist.)

Miss EDMONDS, M.B.,

5, Brunswick Place, Hove.
(Assistant Physician.)

Matron : Miss MILBORNE.

Out-Patients' Department :

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TUESDAY, THURSDAY and SATURDAY, 7 to 8 p.m.

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4, Lorne Villas, Preston Park, Brighton.

Miss F. de G. MERRIFIELD,
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Ex Officio.

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