

of fainting, intoxicants are not given. It has been found that the

#### Juice of a Lemon

in hot water is very helpful at such a time, and no one under my care has ever expired for the lack of brandy! We understand that in any case where the heart has had sufficient vitality to answer to a stimulant, consciousness would have returned in a natural way, had it not been administered.

Cases are frequently received in so bad a state, that under the old *regime*, we should have expected them to need bed and medicine for weeks before they could be pulled together; but now, with the aid of the diet, they are up and about in less than a fortnight. Many are much better in a day or two. This, of course, is a great advantage to all in the Home. As an instance of the first treatment given in extreme cases, I may mention one who came to us. She was a lady of means, but had become a slave to opium. We were asked to take her from another institution where she had proved to be totally unmanageable. Certainly she was in a very terrible condition, not having had a proper night's rest for months, and having been taking an incredible quantity of opium daily.

On her arrival she was put to bed, and was not left alone for a moment night or day. Homœopathic medicine was given to her every hour for forty-eight hours, and as she could take no solid food, she was, for three days, fed alternately upon hot milk and grapes. Turkish and hot water baths also soothed her, helping her skin to act and give her sleep. She gained ground rapidly, and in three weeks her mind was at least clear, and her general condition normal.

A most encouragingly high percentage of our inebriate cases have been permanently cured, and if only they could all continue the diet on their return to their homes or in the situations found for them, the failures would, I am convinced, be fewer still.

It is a painful glimpse into the selfishness of human nature to find so many friends and relatives who cannot, even for the sake of their weak ones, become abstainers from alcohol. The mere suggestion that

their dietary should be changed is often greeted with derision.

The medical man attending the Home, when referring to the fact that a very small percentage of the cases who come to us can be regarded as either encouraging or hopeful, having nearly all gone to the bottom before they entered the Home and many of them having accustomed themselves, not only to alcohol but to drugs—opium, cocaine, etc., which cause very rapid deterioration—says that our results are very remarkable. "Under any circumstances," continues the doctor, "they would be creditable, but when we consider that the material upon which you work is such that it would be rejected by many other organisations, then your results are marvellously successful."

There is no age limit to the cases we receive; many of them have been

#### Habitual Drunkards

for twenty-five years. They are of varying classes; widows of men of independent means, wives of government officials, nurses, governesses, book-keepers, dressmakers, milliners, barmaids, servants, the wives of tradesmen and mechanics, and especially women who have suffered. Trouble or loneliness will most frequently be found to have led to the formation of alcoholic habits, and, alas, the advice of medical men must too often be held accountable.

Perhaps some particulars as to the daily routine in our Inebriates' Homes may be of interest.

Every patient is encouraged to work. Ladies, who have had servants to wait on them, agree cheerfully to this arrangement, accepting it as part of the cure, which of course it is.

A work-list is drawn up and revised week by week, and on it each inmate finds her own name, with carefully chosen duties assigned for her during every section of the day.

Waking-up time is 6.30, and lights are out by 9.30 every night. Before breakfast, all the beds are airing, upper rooms are tidy, and downstairs apartments swept and dusted.

After breakfast, prayers conclude at 8.30, and then the beds are made, each by its owner, the finish-

ing touches being put to the bedrooms by a couple told off for this, while the rest enter the work-room at 9.30.

Sewing ceases for the day at 6 p.m. There are of course intervals for meals and recreation, and the airy, well-lighted work-room is a happy place, often enlivened by chorus and song, and full of the interest of learning how to do beautiful work beautifully.

Everything combines to stimulate hope and awaken right ambitions. Such mottoes will be found on the walls, or in the women's possession, as "Be strong, and let thine heart take courage," "Fight, trust, conquer! *You can!*"

There are four things which the officer in charge seeks to do with every woman who comes under her care. First, win her confidence; second, foster her will-power; third, exercise her memory; fourth, whatever happens, show no discouragement, but lead her to depend for sure deliverance and victory upon God.

#### The Drink Thirst

has been the central idea of most of the women, sleeping or waking—particularly with morphine cases. The great point is to be able to switch off their minds from morphia, cocaine, or whiskey—whatever it may happen to be—and switch them on to *God*, His power, the charm of His Service, and the bliss of having His approving smile upon one's life.

Referring to one who entered the Home lazy, incorrigible, and apparently hopeless, and after fourteen months' stay went out to earn her living, first in the laundry, and then in service, the Warden wrote:—"When her mistress sent me her photograph, showing her in a well-made gown with a happy face, I should not have recognised in her the poor, miserable outcast who shambled into my office the day I welcomed her to the Home. The transforming power of God's grace is *wonderful!*"

Danger confronts every woman who holds the conventional notions concerning diet and drink. "A little stimulant will pick you up; you are below par," says the well-meaning friend. And the first step is taken along a descending road, from which