session, and also that the time has now come when the advocates for Nursing legislation are ready and prepared to utilise the interest excited on the Midwives' question in order to obtain legislation for thoroughly trained Nurses. It is our duty, on the present occasion, to criticise the Midwives' Bill, as it at present stands.' It will be observed that the Bill is preceded by a Memorandum stating that its object is to enable the poor to distinguish between trained midwives and the untrained. In the next paragraph, however, it is pointed out that it is proposed to effect this object by placing on a Register the name of any woman who has been in practice as a midwife for a specified number of years; and considering that, at the last census, there were returned at least 120,000 women who claimed to be engaged in this occupation in the United Kingdom, and the vast majority of whom are absolutely untrained and ignorant, the absurdity of placing these women's names upon a Register as a measure of protection to the poor against the untrained must be apparent.

Passing on to the Bill itself, it is noticeable that the definition of a midwife has once more been altered, and that the description given of her, in previous measures, as an independent practitioner of midwifery has now been concealed under the paraphrase of " a woman who undertakes to attend cases of labour in accordance with the regulations to be laid down under this Act." It is needless to point out that this is a palpable attempt to obscure the great issue at stake, and that such an evasion of an essential definition is by no means straightforward. We would add, so far as the future welfare and comfort of midwives are concerned, that, in our judgment, such indefiniteness may be even fraught with serious consequences.

The Bill provides that only registered women shall, under a penalty, term themselves midwives; that any woman who has chosen to term herself a midwife, and to practise as such for two years, may be registered, but it is typical of the absurdities which seem to be inevitable in Midwives' Registration Bills that she may make this claim at any time within two years after the passing of the Act. Consequently, any number of thousands of women who chose at the present time to take the title of midwife, and to attend a case in that capacity, would be eligible for Registration before the expiration of the period of grace.

The Bill states that registration as a midwife would not qualify any person to be placed upon the Medical Register; but this is a fact so obvious to those who are aware of the Medical Acts that its insertion in this Bill is merely a waste of words. But it is further stated that registration as a midwife "shall not confer upon any woman any right or title to grant any certificate of the cause of death." Considering that it is well known that unregistered midwives, at the present moment, are in the constant habit of giving death certificates, which are complaisantly received by most Registrars, the fact that the registered midwife will have no "right" to do, what unregistered midwives have at present the ability to do, renders the provision of questionable value.

Then we come to the constitution of the Midwives' Board, which it is proposed shall consist of twelve medical men, appointed by London institutions—including the lightly regarded Society of Apothecaries, and the Midwives' Institute—and of six "persons" to be appointed by the Lord President of the Privy Council. The latter term is presumably used to denote midwives. If that be so, there is, at any rate, some justice in proposing that these women should have some voice in the management of their own calling.

One-third of the "elected" members of the Board are to retire annually. Why this adjective is introduced raises various doubts, seeing that apparently the whole Board consists of elected members. However, on this Board are thrown practically the full control of the education, examination and registration of midwives, and of their sub-sequent control, and, if necessary, suspension or dis-registration. All its work is to be, apparently, done subject to the approval of the General Medical Council, and this opens up the question, which the Bill itself does not solve, as to what would happen if the General Medical Council failed to give its approval. Apparently, in that case, an appeal is pcrmitted from the Midwives' Board to the Privy Council, a procedure which in its turn raises questions of a novel and most important character.

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166



