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## Editorial.

### THE MATERNITY NURSE.

Under the Midwives' Act, which has now become law, women who are registered rank as independent practitioners, a condition which forces into prominence the question of the training of maternity nurses. Many who wish to be qualified to care for obstetric cases have no desire to take the entire responsibility of such cases. They wish to work under the direction of a medical practitioner, in the same way that they undertake the care of medical and surgical cases under medical direction. Many nurses, in the past, have qualified themselves as midwives and obtained the certificate of the London Obstetrical Society solely to afford some guarantee, in connection with private nursing work, that they know their business. At the same time they feel, on the one hand, that evidence of skill as a midwife is no guarantee of knowledge of how to nurse a woman who has been delivered, and, also, the fact that this certificate can be gained by any woman who has had a few months' experience of midwifery work depreciates its value to the thoroughly trained nurse. She does not desire to rank side by side with a midwifery specialist, but to be regarded as a thoroughly trained nurse capable of undertaking the nursing care of medical, surgical, and obstetric cases. There is at present no certificate obtainable by a maternity nurse which affords a guarantee that she possesses more than the knowledge attainable in the course of a few months' residence in a special hospital.

The result is manifest in two directions. (1) Medical practitioners complain that the knowledge of the average maternity nurse leaves much to be desired. (2) Certificated nurses have become accustomed to leave maternity nursing to specialists, and have not realised to an appreciable extent either the value of adding experience in obstetric nursing to their qualifications, or that as members

of a profession they have a duty to the lying-in mother. This is a reproach which can with justice be levelled at us, and which should be removed. It is a question which deserves the earnest attention of superintendents of nurse-training schools, individually and in conference. It is not too much to say that the bulk of certificated pupils leave our nurse-training schools absolutely ignorant of the methods of nursing the lying-in mother and child, a condition of things which no superintendent of nurses can deliberately justify or regard as ideal.

We address ourselves particularly to superintendents (1) because the opportunities for obtaining obstetric training for their pupils, whether in special wards of the training-school, in the homes of the poor, or by affiliation with special hospitals or poor law infirmaries, rest mainly with them. They have the power of representing the necessity for such training to their committees, and of asking for the authority to organise it. (2) Because, in the past, it appears to us that the rank and file of the nursing profession have shown themselves more alive to the necessity for obtaining experience in this branch of nursing than the superintendents have done as to its provision. Many Sisters and nurses have appreciated its value sufficiently to pay £2 2s. a week for three months at a special hospital in order to obtain it, without any special encouragement from their superior officers. The questions which now present themselves for consideration are:—(1) What is the best method of providing education in this special branch for maternity nurses as apart from midwives? (2) How can this knowledge be tested so as to afford a guarantee of its thoroughness to medical practitioners and the public? If the time has come, as we believe it has, for the recognition of two main principles (1) that the curriculum of education of all trained nurses should include instruction in obstetric nursing, and (2) that special training in this one branch only should

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