

ly the Central Midwives' Board. Under Section VIII. of the Act, county councils were created the supervising authority. Miss Wilson considers, and we entirely agree with her, that "for various reasons, notably the possibility of local rivalries and jealousies, it is most desirable that these bodies should retain such important administrative duties in their own hands." Such councils may, however, if they think fit, delegate their powers and duties to committees of their own appointing or to district councils within the area of the county. Such district councils can similarly delegate their powers and duties to a committee, and it should be noted that women are eligible to serve on all such committees.

Amongst other points, Miss Wilson dealt with the problem of the untrained midwife, and with the lack of provision for assuring a fee to a medical man when his attendance is necessary in the case of the poor. Miss Wilson considers that "the formation of a network of midwifery insurance clubs all over the country, for providing medical skill when needful, will become an essential development of the Act." In reference to the training of midwives, Miss Wilson said:—

"I should like to see the formation of a National Council for training, the principal functions of which would be to map out the country, with local help, with a view to the best organisation for training and the provision for midwives; to collect funds; to found training scholarships under approved conditions of binding midwifery probationers for a specified period of work in poor districts; to utilise training as far as possible in our present hospitals; and, later, to found itself, or to help to support, a national maternity hospital, in which the training should be on the best possible lines specially available for midwives for the poor. In time, grants might be made to districts to help to support a midwife. Considerable funds would be required, and the undertaking should combine the best knowledge and experience available; and should include the heads of those urban and rural Maternity Societies which have already done such invaluable work in training midwives for the service of the poor."

"As to the qualifications of midwives, the speaker pointed out that "the care of human life and health is of *primary* importance in this matter. Do not," she said, "let us be too ready to say 'Here is a kind and homely woman who must earn her livelihood; come, let us train her.' We should use much wise judgment and a little ambition in our selection, always keeping in mind the special responsibilities that await the worker."

"The old saying that the people perish for lack of knowledge is still true. If we wish them to learn a real understanding of the wonderful benefits of fresh air, soap and water, and suitable food for their

infants and young children, we cannot hope to do so by training a class of midwives who share their views and prejudices on these questions. The present high rate of infant mortality should make us consider this matter seriously. Can we reasonably hope that a few months' training given to an uneducated woman will dispel the habits of a lifetime? There will remain for the next few years a quite sufficient number of untrained women to carry on the old traditions: let us beware lest we increase that number.

"I do not propose to add more on this subject than my strong opinion that those systems which aim first at thoroughness and efficiency will be the most successful in the end; and that as far as possible uniformity of training should also be aimed at."

COUNTRY DISTRICTS.

Miss Alice Gregory dealt from the standpoint of practical experience with the immediate bearing of the midwifery question on the everyday life of the working classes. She stated that she had practised for seven and a-half years as a district midwife in Somerset with the object of arriving at the real facts of the matter.

Speaking of the question of whom shall be trained as midwives, Miss Gregory reviewed the advantages and disadvantages of the uneducated midwives as they appeared in the eyes of their *clientèle*.

ADVANTAGES.

"I am told," she said, "by my patients that some working women prefer to be attended by people of their own class. Firstly, because they have always been used to them. Secondly, because under the stress of competition they usually obey the patients' orders. Thirdly, the drinking women like them because they promote an atmosphere of drink."

DISADVANTAGES.

Among the reasons why my patients have expressed disapproval of the old midwives are the following. Being of the same class as themselves:—

1. They carry tales, *i.e.*, gossip as to poverty, &c.
2. They are often incapacitated by drink.
3. They promote, or have no authority to quell, the indecent conversation and obscene jests of the other attendant women. Young married women have assured me I could hardly believe the degradation they have felt in being the butt and centre of such conversation, and I know from experience that it must be put down with a firm hand.
4. They do not wash the mother in the slightest degree.
5. They frequently only wash the baby once, so that another woman must be hired to do so.
6. They demand from 3s. to 6s. to be spent on spirits, and the woman who washes the baby (and who is usually *not* the woman who cooks the

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