

whether such a motion as this, inconsistent as it was with the resolutions of the Council, was in order.

The Chairman replied that he was not prepared to rule the motion out of order.

Dr. McVail, continuing, said that the main point he wished to emphasize was that the intention of those who were promoting this legislation was to create a new class of practitioners, a class of persons who would independently conduct midwifery cases. Both Bills applied to women only, but it was perfectly certain that the matter would not rest there. There were throughout the country a great many men who had gone through a part of the medical curriculum and who had been attending cases of midwifery for a long time. This Council had been endeavouring to put down this class and were they now to open a door for them? Were they to say to men of that kind that while they were not fit to enter the profession, they could go and join this inferior class of practitioners even though they happened to be men? If they said they were not to do that, then they were going to exclude from this grade the very people who were of all others the most competent to meet the requirements of the situation—men who had got a certain amount of surgical and medical training and who had had great experience in midwifery cases. Not only so, but practitioners so admitted, whether men or women, would unquestionably seek to extend the bounds of their work and would begin to treat the diseases of women and of children. They would gradually come to be practitioners upon whom the mothers in the poorer classes of society would depend for advice in connection with themselves or their offspring. Severe tests were now imposed upon dentists, but would anybody contend that the responsibility of a dentist was to be compared with that of a person who attended a case of midwifery? In all these proposals women were to be entitled to attend cases without the supervision of a medical man. When one of the Bills was being discussed by this Council he proposed that there should be an amendment to provide for the supervision of a medical practitioner, but the proposal was rejected. The statement was made that every year in England and Wales 500,000 women were attended by midwives, but was that to cause this Council to completely disunite the three great medical sciences which were united for them finally in the Act of 1886? Could this great country not meet the wants of these 500,000 women by securing for them through the means of the various boards of guardians and parochial boards the attendance of registered medical practitioners? The profession, they were told—and no journal told them more persistently than the *Lancet*—was becoming overcrowded. If that were so, then surely the profession could undertake this extra work, and he thought there could be no higher duty for the

Government than to give assistance to women in these circumstances. He did not object to a system of registration for midwifery nurses, but he objected to the creation of a body of practitioners who would without medical supervision undertake the management of midwifery cases and rely upon their judgment alone for their treatment. It might be said that what he proposed would be unfair to women, but he would remind the Council that women were now admitted to the medical profession practically on the same terms as men. If women desired to follow midwifery as a profession they could enter the profession in the ordinary way.

The Chairman said he would suggest that the Council should not go into the question of midwives against midwifery nurses or women medical practitioners. He thought they should confine themselves to the discussion of the general question which was raised by Dr. McVail's motion.

Dr. Atthill, in seconding the motion, said that no one who had had such extensive practice as he had had in midwifery cases could fail to be impressed with the ills which were inflicted upon women and children by want of knowledge of the principles and practice of midwifery, and every effort should be made by this Council to enforce a proper standard of education in midwifery upon every person who went upon the Register. It was impossible to teach midwifery in three or six months as some of these institutions professed to do, and the sooner the Council looked into the matter the better. He urged for the sake of humanity that the Council would not vote against this abstract resolution.

Mr. Carter said he doubted very much whether the Council would act wisely by adopting this resolution. One would think that Dr. McVail had been speaking of something new. Instead of that he had been speaking of a practice as old as human nature itself. What they had to deal with in this Council were the facts of life as they found them, and if the Council could not remove the evils incidental to the employment of women in midwifery cases they should do their best to minimize them, and he thought that they should probably find that minimizing these evils by giving instruction to women would be a step towards doing away with them entirely, and towards producing in the public mind a demand for a better educated class of practitioners still.

Dr. Glover said he could not help thinking that this resolution was inconsistent with the previous action of the Council. He assured Dr. McVail that the Bills only contemplated women practising midwifery under the most limited circumstances and with the supervision of the medical profession. He was as anxious as Dr. McVail that there should be supervision, and he would tell the Council that at a most agreeable, though small, meeting of the Committee on the Midwives Bill, consisting of Mr. Brown, Dr. Rentoul, and himself, after much

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