

"in order to bring the Bill into substantial agreement with the Bill of the British Medical Association."

All midwives should give their earnest attention to these Amendments, especially to the following points insisted upon by the British Medical Association:—

(1) "From and after the first day of January, one thousand nine hundred and two, a woman shall not be entitled to recover in any court any charge for any attendance on or service to a lying-in woman unless she is certificated under this Act; nor shall any midwife certificated under this Act be entitled to recover in any court any charge for any attendance or service not authorized by this Act, or any charge for attendance or service as a midwife unless in the latter case she has either in person or by a substitute duly licensed under this Act performed the duties to be prescribed by the Central Midwives' Board pursuant to this Act."

Private nurses will do well to note this proposed provision, as those of them who undertake monthly nursing will find that they are quite unable to recover any fees for nursing such cases, should the patient object to pay them. Their position, therefore, will be a most precarious one.

(2) The provisions at present incorporated in the Bill whereby two persons (one of whom shall be a woman) are appointed by the Lord President of the Council, and one person by the Association of County Councils, are entirely removed. That four out of seven members of the Body governing a woman's calling, should be medical practitioners, thus always giving them a majority vote, does not satisfy the Council of the British Medical Association. They demand that *every member of the Central Midwives' Board shall be a medical practitioner*, and they deliberately remove the one seat given to a woman on the Governing Board. They require that the Central Midwives' Board shall be composed of seven registered medical practitioners, six of whom shall be appointed by the General Medical Council, and one by the Lord President of the Privy Council, and they are careful to insert a clause that:—

"The general expenses of the Board shall include the payment to the members thereon of remuneration for their services, and reasonable travelling expenses upon such a scale as may be approved by the Treasury."

(3) The Council of the British Medical Association having demanded for the medical profession every seat, and all the fees, of a Board formed to govern midwives, it is not surprising that they adopt the same line as to the local supervising authority. They require:—

"Every County Council of any administrative county and County Borough throughout England and Wales shall, on the passing of this Act, appoint a Committee of no fewer than three registered medical practitioners, not teachers or examiners of midwives, as the local supervising authority over midwives within the area of the said County."

It will be noted that midwives under the Bill will be compelled to take out an annual licence, by which they are entitled to practise

in the county in which they obtain their licence. The supervising authority may report them to the Central Midwives' Board, may suspend them pending inquiry by the Board, may, in fact, ruin their personal character and professional practice, and this power is to be put exclusively into the hands of local medical men. It is certain that the more successful a midwife is in her practice in a county, the more will she come into financial competition with the men with whom rests the power of renewing her licence, and from whom there is no power of appeal except to their medical colleagues. Are midwives willing to put themselves into this position? I have no hesitation in saying that the first effect of the Act will be to prevent well trained nurses from obtaining a qualification in midwifery, for they would not take out licences under such degrading conditions, or place themselves under a Governing Body which denied them any representation. It must further be noted that no licensed midwife may, if the provisions suggested by the British Medical Association become law, receive a lying-in patient into her house unless her house, as well as herself, has been certified by the local supervising authority, under a penalty of a heavy fine, or imprisonment with or without hard labour. It would seem that, if the Council of the British Medical Association had deliberately set themselves to frame regulations insulting to midwives, they could not have succeeded better. The attitude adopted proves that midwives have little to hope for if they place themselves under such conditions, and the proposals of the British Medical Association are the latest evidence of how cruel men can be when legislating for women, and how absolutely unfit the medical profession is to frame rules for the government of a body of women of whom it is somewhat jealous.

(4) The last point in the amendments of the British Medical Association to which attention must be directed, is that "nothing in this Act respecting midwives shall apply to legally qualified medical practitioners." Of course not; does the medical man exist who would put himself under such penal restrictions as those which are proposed for midwives? If those who are supporting this Bill for the licensing of midwives, accept these amendments, they will most certainly betray the interests which they undertook to guard. There is no doubt that they gave away the situation when they accepted the amendment to *license*, instead of *register* midwives, and that the association for promoting this Bill, misled the public when it retained its original title of the "Association for Promoting the Compulsory Registration of Midwives," when it had given up its original programme, and had consented to their annual licensing.

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