

- Miss C. M. Beachcroft, late Matron, County Hospital, Lincoln.
- Miss Cureton, late Lady Superintendent, Addenbrooke's Hospital, Cambridge.
- Miss G. Knight, Lady Superintendent, General Hospital, Nottingham.
- Miss M. Mollett, Matron, Royal South Hants and Southampton Hospital, Southampton.
- Miss M. Huxley, late Lady Superintendent, Sir Patrick Dun's Hospital, Dublin.
- Miss L. Bradshaw, Lady Superintendent, Donnybrook Hospital, Dublin.
- Miss A. Nutting, Superintendent of Nurses and Principal of Training-School for Nurses, Johns Hopkins Hospital, Baltimore, U.S.A.
- Miss Brennan, Lady Superintendent of Nurse-Training School, Memorial Hospital, Richmond, U.S.A.
- Mrs. Quintard, Superintendent of Nurse-Training School, General Hospital, Puerto Príncipe, Cuba.
- Miss Lucy Walker, Superintendent of Nurse-Training School, Pennsylvania Hospital, Philadelphia, U.S.A.
- Miss Hanna Kindbom, late Superintendent of Nurse-Training School, John Sealy Hospital, Galveston, and Professor of Nursing in the University of Texas, U.S.A.
- Miss I. Merritt, Superintendent of Nurse-Training School, The Hospital, Brooklyn, U.S.A.
- Miss Maud Banfield, Superintendent, Polyclinic Hospital, Philadelphia, U.S.A.
- Miss Dolliver, Superintendent of Nurses, Massachusetts General Hospital, Boston, U.S.A.
- Miss Drown, Superintendent of Nurses, Boston City Hospital, Boston, U.S.A.
- Miss Palmer, Editor-in-Chief, *American Journal of Nursing*, Rochester, U.S.A.
- Miss Nevins, Superintendent of Nurses, Garfield Hospital, Washington, U.S.A.
- Miss McMillan, Superintendent of Nurses, Presbyterian Hospital, Chicago.
- Miss Maxwell, Superintendent of Nurses, Presbyterian Hospital, New York, U.S.A.
- Miss McIsaac, Superintendent of Nurses, Illinois Training School, Chicago.
- Miss Murray, late Lady Superintendent, Royal Victoria Hospital, Montreal, Canada.
- Miss S. B. McGahey, Lady Superintendent, Prince Alfred Hospital, Sydney, Australia.
- Miss M. D. Farquharson, Lady Superintendent, Bendigo Hospital, Victoria.
- Mrs. Grace Neill, Assistant Inspector of Hospitals, New Zealand.
- Fru Charlotte Norrie, Corresponding Secretary of the Danish National Council of Women.

HON. VICE-PRESIDENTS.

Appointed under Article II.

- Miss Isla Stewart, Matron of St. Bartholomew's Hospital, London. For Great Britain and Ireland.
- Miss Sandford, Matron, City Hospital, Edinburgh. For Scotland.
- Miss C. R. Mill, Matron, St. George's Hospital, Bombay. For India.
- Miss M. A. Snively, Lady Superintendent, General Hospital, Toronto. For Canada.
- Miss S. B. McGahey, Lady Superintendent, Prince Alfred Hospital, Sydney. For Federated Australia.

- Miss F. Keith Payne, Lady Superintendent, Wellington Hospital, New Zealand. For New Zealand.
- Miss Milne, Launceston Hospital, Tasmania. For Tasmania.
- Fraulein Hedwig von Schlichting, late Lady Superintendent, General Hospital, Hamburg. For Germany.
- Mej. L. Krusysse, Lady Superintendent, Wilhelmina Hospital, Amsterdam. For Holland.
- Miss Amy Turton, Directress, Casa di Cura, Florence. For Italy.

The Training of Midwives.

Self-defence is the first instinct of every living thing, and nowhere is it more strongly in evidence than amongst members of the medical profession. We presume this was the motive power which impelled Sir Michael Foster, M.P., to urge at a meeting, held on Monday at 3, Grosvenor Place, in support of the newly-formed Rural Midwives' Association, that "the women should not be too highly trained or they might think they were as good as the doctors. Nor should they be too highly remunerated, or they would feel themselves above the people of the cottage."

The reasoning contained in this argument appears to us both prejudiced and fallacious. Prejudiced, because it is regarded from the standpoint of self-interest only; whereas, if it is to be convincing, it must consider the general good, not that of one section of the public. It cannot be maintained that it is not for the good of the patient that midwives should be highly trained, since great responsibilities are now, whether wisely or unwisely, entrusted to them by the State. And, if this is so, then the public good must have primary consideration, seeing that both medical men and midwives exist primarily for the benefit of the community. And the argument is fallacious, because the better trained a midwife is, the more keenly she will appreciate the grave issues with which she is dealing, and the readier she will be, knowing her own limitations, to seek medical assistance when necessary. It is only the half-trained woman who, wise in her own conceits, feels herself competent to deal with situations which are beyond her powers.

As for limiting the remuneration of midwives, so that they may feel themselves on a par with the people of the cottage, we do not imagine this principle would work well if applied to the profession of medicine, and we see no reason for assuming it more sound when applied to midwives.

We learn that Governor Yates, of the State of Illinois, has attached his veto to the Nurses' Bill which provided for their examination, State registration, and licensing. The nurses are consoling themselves with the hope that a future Bill may confer further powers of self-government upon them.

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