

order shall have been given for the same by them or any of their officers, or by the overseers," and the Board are advised that, under this enactment, it is competent to the Guardians to pay the fee of any medical man called in on the advice of a midwife to attend upon a poor person in case of difficulty.

The Board would suggest that medical men and certified midwives practising in the Poor-Law Union should be informed that, in cases arising under Rule 18, the Guardians will, on being satisfied that the woman is too poor to pay the medical fee, be prepared to exercise their powers under the Section and to pay a reasonable remuneration to the medical man called in. Any such payments should be on a definite scale which should be suitable to the local circumstances and to the services rendered, and which should be duly notified to the local medical practitioners.

It appears to the Board that the exercise by Boards of Guardians in a careful but liberal spirit of their powers under the enactment quoted will furnish a satisfactory solution of the problem to which they have referred, and that no reasonable ground of complaint should remain either to the public or to the medical profession. Moreover, general action on the part of Boards of Guardians in the direction indicated would tend to the preservation of two most important principles which are in danger of being overlooked; first, the responsibility of the husband or natural guardian of the patient to provide for her necessities, and secondly, the right of the Guardians to determine who, by reason of poverty, is entitled to medical assistance at the expense of the rates.

I am, Sir, your obedient servant,
S. B. PROVIS, Secretary.

Registration of Midwives in Cape Colony.

Some discussion took place at the meeting of the Cape Colony Medical Council last month on the proposal to cease registering the diplomas of midwives when obtained elsewhere than in South Africa, and to make the examination in force in the Colony the only test for registration. Dr. Wood pointed out that it was no hardship to a woman trained elsewhere to pass an examination in the Colony, and Dr. Darley Hartley, who defended the alteration, said that the difficulties of properly appraising the claims to registration of the almost innumerable diplomas submitted to them from all parts of the world were almost insuperable. Eventually the discussion was adjourned.

Correspondence.

CAN MIDWIVES MAKE A LIVING WAGE? *To the Editor of "The Midwife."*

DEAR MADAM,—I think the report of the Advisory Committee of the Association for Promoting the Training and Supply of Midwives a very serious document. It brings

us back to the everlasting question of the commercial value of women's skilled work, and the apparent deduction is that women's midwifery in England is worth nothing. This is really the serious aspect of the question—because unless it is recognised and dealt with, the poor mothers of the nation must continue to submit to unskilled attention. How is it that salaries upon which they can only just scratch along are offered to district nurses, so called cottage nurses, inspectors of midwives, and all the rest of them? It is because the work of all these women, and the value of their remuneration are arranged by committees of rich patrons and persons, who estimate them as the "labouring class," and are under some extraordinary delusion that because their work relieves suffering it should be done partly as a charity. I have heard a lovely lady of title, tossing the plumes in her ten guinea hat, "deprecate with all my heart this mercenary spirit in one permitted to follow after Florence Nightingale," when a district nurse made bold to inform the Committee "that she could not afford to buy a sufficient supply of water-tight boots on a salary of 14s. a week"—the 14s. being expected to cover board, lodging, washing, clothes, stamps, holidays, journeys, and a dozen other little expenses. The truth is that the wages, all found, of domestic servants upon whom the comfort of the rich depends is just double that offered for the work of women upon whose character and skill the comfort and may be the lives of the poor depend. The reason that "a net of inferior standards of nursing" has been cast by the rich and influential all over rural districts is because it is *cheap*. It is useless to tell me that the poor prefer ignorant and illiterate nurses and midwives, they do not—or that there would not be found a sufficient supply of efficient nurses and midwives if they were *paid a living wage*. Many would enjoy the work, but they must have *watertight boots*, or, in other words, the decencies of life. These no gentlewoman (and I include as such all *refined women* such as alone make the best nurses and midwives) can provide on 14s. a week. If only the Duchesses who dabble in philanthropy would try it before organising nursing in rural districts, it would, I think, do a vast amount of good.

Yours truly,

A MIDWIFERY NURSE.

[In an overpopulated country as this is, one must look at the economic conditions before coming to a just conclusion concerning the supply of labour. Work at starvation wages means unskilled workers or indentured labour. That is the present condition of the rural midwifery market in England. Are the poor, especially the mothers, of England worth skilled nursing, and midwifery in their homes? (Until recently they have apparently been a negligible quantity.) We think they are worth the *best*, which cannot be the *cheapest*. The only remedy is to pay a just price, and £100 per annum is not at all too much for the inclusive cost of a skilled nurse or midwife.—Ed.]

[previous page](#)

[next page](#)