

The Midwife.

The Basis of a Profession.

Now that a definite standard of professional knowledge is demanded of midwives, and there is one portal—i.e., the Roll of the Central Midwives' Board—to recognition as a midwife, we are beginning to hear of the "profession of midwifery," and indeed, in books of reference we now find our calling classified amongst the professions for women.

Can midwives really claim to belong to the ranks of professional workers, and what test can we impose with a view to ascertaining our status?

It has been laid down as one of the tests of a profession that the members share their professional advantages, and make their own professional regulations. That is to say (1) the midwife must co-operate rather than compete with others of the same calling, and endeavour to develop the spirit of comradeship, which is the bond of union, as it is the source of strength of all powerful professions. Midwives, and indeed most women workers, recognise this truth very dimly at present, but it must be assimilated and put into practice if they wish to make any progress along the lines of professional freedom. The second test of a profession is that its members must help to make the regulations by which they are governed, and if we test ourselves by this standard we must own that at present we cannot claim a place in the ranks of professional workers. Our governing body—i.e., the Central Midwives' Board—does not include even one representative placed there by midwives themselves. We cannot, therefore, make our own professional regulations. Surely it is time that the midwives admitted to the Roll, "by examination," and who have thus given evidence of competence in their work, should no longer be disfranchised, but should have a voice in the regulation of their calling.

But we must make no mistake in this matter. Such representation will not be given to us without effort on our part. We must not only ask for it, but work for it. And further, isolated effort will be of no avail. It is only through the development of the professional spirit, and through co-operation with one another, that we shall enter into our heritage.

The services of the midwife who stands at the gate of life are of national importance. To her are entrusted the care of two human lives at a critical stage in their existence, and her competence, or her lack of it, will leave an impression on those lives, may be for the rest of their existence. The nation is no longer content that mothers should be attended in childbirth by women who have never been educated for their work, and now demands that they should be trained and tested. Is there any valid reason why these trained and tested workers should be excluded from self-government? Is there not rather every reason why they should be accorded it?

The Sheffield Dried Milk Scheme.

A very interesting paper on "The Sheffield Dried Milk Scheme" was presented at the meeting of the British Medical Association, held in that city, by Dr. Albert B. Naish, M.A., Assistant Physician to the Sheffield Royal Hospital, and reported in the *British Medical Journal* in the proceedings of the Section of Public Health and Forensic Medicine. Dr. Naish said in part:

In the year 1900 two lady health inspectors were appointed with the special object of visiting the homes of women who had been recently confined, and helping them (where necessary) by advice on the upbringing of infants. The number of these inspectors has been gradually increased until now, when there are fifteen engaged in the work of the city. The salaries have also been increased, and more stringent conditions of appointment have been made: none but licentiates of the Obstetrical Society are accepted, and, more recently, only those with a hospital training as well.

In October, 1906, a special committee was appointed by the City Council to consider the high rate of infantile mortality in Sheffield, and the best means of reducing such death-rate. The committee co-opted medical representatives of the hospitals, as well as other representative men and women, and examined twelve witnesses. Amongst other recommendations made was this one:

The majority of the committee are not convinced that the advantages to be obtained from infant milk depôts warrant the establishment of such depôts at Sheffield, but they are in general agreement that beneficial results will accrue from the supply of dried milk for bottle-fed babies during the season when diarrhoea is prevalent.

This latter conclusion was come to largely owing to the evidence of Dr. Newman, then Medical Officer of Health of Finsbury.

During the summer of 1907, accordingly, the council determined to open depôts in various quarters of the city, to which mothers could bring their babies. These babies were to be weighed weekly, advice given, and, if suitable, dried milk could be supplied at cost price. Early in August five such depôts were opened and placed under the charge of Dr. Garrick Wilson and myself. The lady inspectors have worked in close connection with the scheme, in the first place selecting from among the houses they visited those babies which were not progressing satisfactorily, and afterwards helping the mothers to act on the advice given.

The number attending increased gradually, till from about the middle of September to the end of October there were about 110 attending each week. At first it had been intended to close all the depôts during the winter months, but as there were a number attending and progressing well on the dried milk whose previous digestive troubles

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