

Board will retain the one portal system, which is the most valuable feature of the Midwives' Act.

It must be noted that the Committee state that "the difficulty of replacing the unqualified woman by a superior order of practitioner is not unfortunately altogether a question of supply, as, apart from the feeling of medical men in the matter, the reluctance of a certain class of the poor themselves has to be overcome; we were told that in many cases they prefer the old type of attendant, who is probably well known to them, and is usually more helpful, in the house, although she is often uncleanly and inexperienced. Sometimes, too, the preference may be due to her companionable, not to say convivial, qualities, and, occasionally, but we hope rarely, to the more sinister reason, as a medical officer put it, that she is believed to enjoy 'a lot of churchyard luck.' In commenting upon this, the witness said, 'they do not want the children to live.'"

THE ORGANISATION OF NURSING.

When the Committee proceed to advocate "the recognition and supply of three grades of nurses (all of whom should be certified midwives)" we think they are going outside their Terms of Reference "to consider the supply of midwives." It will be observed also that the standard for certified midwives is a uniform one, and the committee themselves deprecate the establishment of a grade inferior to that approved by the legally constituted authority, maintaining the one portal system.

But, while advocating a single standard for midwives, the Committee go out of their way to recommend the recognition of three grades of nurses, thus dealing with a question which was not referred to them for consideration, and on which it was impossible for them to arrive at an adequate conclusion without hearing evidence on the question of nursing education, a question large enough to occupy the attention of a Committee appointed for this sole purpose, and which should include experts on the subject under consideration.

The three grades of nurses advocated by the Committee are:—

- (a) Highly trained fully certificated nurses.
- (b) Nurses with not less than twelve months' general and midwifery training, willing to work upon either the visiting or resident system.
- (c) Trained and certified midwives.

It will be observed (a) that the Committee offer no definition of the term "fully certificated; (b) that the length and not the quality of the training is all that is referred to, nor is it even laid down that this training must be received in the wards of a hospital; (c) that the third class of "nurses" mentioned by the Committee are not nurses at all, but midwives. This lack of precision points forcibly to the necessity for an authoritative definition of the term "trained nurse."

THE EFFECT OF REGISTRATION.

The Committee quote the evidence of a midwife practising in Southwark that "as time went on the profession was likely to appeal to an increasingly high class of woman. They are, she said, of a higher and improving class now." Similarly one of the medical witnesses referred to the "change

in the estimation and quality of midwives which the Act has effected 'by raising them into a profession,' and giving them 'a public title.'"

THE ENLARGEMENT OF THE BOARD.

Proposals were made by the Central Midwives' Board for its enlargement by the addition of six new members, and, as we recorded last week, the Committee have recommended the addition of four members and the removal of one. Everyone who has watched the proceedings of the Board must be impressed by the large amount of business with which it has to deal, while, if it deputed part of this business to sub-committees the Board is so small that the same members have to act over and over again.

THE LAST RESORT.

We are glad that the Committee recommend that any woman whose name has been removed from the Roll should "be prohibited from attending professionally on a lying-in woman in any capacity." At present, it is not unusual, when the removal of a midwife from the Roll is under consideration, for a member of the Central Midwives' Board to advocate that she should "only be allowed to act as a nurse," because she is unfit for the responsibilities of a midwife. The nursing profession is justly indignant that it should be regarded as the *dernier ressort* of women too ignorant or criminal to be retained on the Midwives' Roll, and it is small wonder that it claims to have a register of its own which can be purged of undesirables.

AN ANNUAL FEE.

It was suggested as a means of securing the correctness of the Midwives' Roll, that a small annual fee should be imposed, "a proposal which has a parallel in a provision inserted in the Nurses' Registration Bill last year, and met with no opposition."

A Midwives' Bill for Scotland.

At the annual meeting of the Scottish Sanitary Congress, held at Ayr, N.B., Dr. Campbell Munro, Medical Officer of Health for Renfrewshire, spoke on the need for educating midwives. He moved a resolution urging upon the Secretary for Scotland the expediency of introducing in the next session of Parliament a Midwives' Bill for Scotland upon the lines of the English Midwives Act, with such amendments as experience and the recent report of the Royal Commission had shown to be desirable.

Councillor M'Ghee, Clydebank, seconded.

Dr. Brown, Ayr, attributed a large proportion of the infantile mortality to the recklessly improvident marriages among the poorer classes.

The President said that he was astounded to hear that it was a common thing for a still-born baby to be taken away in the big pocket of the undertaker, and slipped into the head of the coffin of an adult. Illegitimate babies, he continued, were born as healthy as legitimate babies, but they died twice as quickly. They were not wanted, and they were put to death.

Dr. Munro's resolution was unanimously adopted.

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