

## The Midwife.

### A Hospital in Utopia.

Time was when women in labour were attended solely by practitioners of their own sex, and so strong was the feeling in this country against the admission of men to the lying-in room—a feeling still existing with equal force not only in the zenanas of India, but in many other Eastern countries—that it is related that the first male practitioner whose services were requisitioned for an urgent case had to attend the patient in woman's dress. Later midwifery passed largely into the hands of men, not because men were more capable than women, but because, as medical education improved, the knowledge of medical men was greater, and therefore they became more proficient than midwives. The consequences were twofold: firstly, it became increasingly usual for medical men to be engaged or summoned to assist women in childbirth; and secondly, as all the most desirable cases were absorbed by the medical profession, midwifery was rejected as a means of livelihood by many women of the class who formerly practised it, until the term midwife became almost one of reproach, and certainly, for the most part, synonymous with ignorance and unfitness, so that it was mostly practised by women of the lowest class. It will be remembered that Mrs. Gamp was a midwife as well as a "sick nurse," and attended lyings-in and layings out with equal readiness; it is perhaps as well that her biographer does not record with what result.

Like trained nursing, midwifery to-day has been rescued from the evil plight into which it had fallen, and thousands of trained women are to-day caring for their fellow-women in childbirth to their comfort and advantage, for it must be remembered that, so far as the poor are concerned—and it is mostly the poor who are attended by midwives at the present time—the medical practitioner who attends a lying-in woman does so only at the time of confinement, and delivers the patient (if, indeed, delivery has not been effected before his arrival by an ignorant (so-called) monthly nurse). The midwife, on the other hand, if summoned sufficiently early, remains with the patient throughout the second and third stages of labour, and visits her daily for ten days, subsequently attending to her comfort and dietary and that of the child during that period.

What the future of midwifery as practised by women in this country will be it is not easy to foresee, except that in the future, as in the past, their opportunities of usefulness will be limited only by their opportunities of acquiring knowledge. At present the standard required by the Central Midwives' Board is limited to the acquisition of "such knowledge as it would be dangerous to a midwife to lack," and neither the professional prestige attainable nor the remuneration which is the reward of hard and responsible work, are sufficient to attract a highly educated class of women in large numbers to adopt midwifery as a profession.

But in Germany a scheme has been evolved, which could scarcely have been suggested except in a country where male domination is the rule, to provide not only male practitioners to deliver women in childbirth, but also to attend them as monthly nurses. Incredible, but apparently true, for a correspondent describes in an article of nearly a column length in the *Times*, under the heading "A Hospital in Utopia," a new movement to provide a maternity hospital where "nurses in the professional sense are to be superseded by fully qualified doctors of both sexes. These young doctors, immediately after taking their degree, are to spend a certain time in the hospital, giving to the patients all those professional attentions which are usually left to the trained nurse, while the patient is also to receive the care which affection only can bestow, from her personal friends. Not only the nurse but the Matron will thus be found superfluous." Verily, it takes a male mind to conceive, and male obtuseness to propound, such a scheme. The best we could wish for this unique institution is that it should remain in Utopia, but apparently it is to materialise in bricks and mortar at Munich. The opportunity for acquiring additional knowledge may be desirable in the interests of medical education, but how it will benefit the patients is not easy to understand. Imagine a hospital in which there is no head to the nursing department, the office having been abolished as superfluous, and where the nursing duties are divided between medical students who have just qualified and untrained friends of the patients, and this in a maternity home where, if nowhere else, woman is eminently in her own sphere.

The scheme is promoted by a group of Munich doctors, whose first maxim is that "childbirth, like other dangerous operations (!)

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