

## The Midwife.

### The Nursing of General and Maternity Cases.

At the Annual Poor Law Conference for the South-Western District, including the counties of Cornwall, Devon, Dorset, Somerset, and Wilts, held at Exeter, and presided over by Sir Thomas Dyke Acland, Mrs. Heywood Johnstone, Vice-Chairman of the Midwives' Committee, Cornwall County Council, read a paper on the "Treatment of the Sick Poor, including Maternity Cases." The speaker said that with regard to maternity work, the Midwives' Act had done a great deal for the country, especially in lowering the mortality from puerperal fever. In most cases the poor were, she thought, able to pay the midwife's fee but they could not always pay the fee of the doctor called in on the advice of a midwife, and some provision should be made for this through the County Council or the Guardians. A great difficulty was experienced in providing midwives for the sparsely populated country districts, and in very poor places there was a case for assistance from the Guardians or the future Public Assistance Committees. She thought also that the County Councils should have larger powers to give grants towards the training of village nurses and midwives, and in poor midwifery cases there should be a special fund administered through the County Council, or Local Supervising Authority, for paying the doctor without obliging the poor to receive an order as for Poor Law relief.

The organisation of nursing and midwifery through County Associations is a convenient method, but the danger in regard to nursing is lest an inadequate standard of training should be recognised. Midwives are now compelled to attain a certain standard, albeit a very modest one, before they can legally practise, and in rural areas there is a temptation to give a midwife a quite inadequate smattering of nursing knowledge, and then call her a trained nurse.

Wherein the diseases of the poor in rural districts differ from those of their fellow sufferers in the towns, where the need for the employment of fully trained Queen's Nurses is almost universally recognised; is not apparent. Moreover, in the towns a doctor is easily accessible whereas in rural districts he may be many miles away. The fact is the quality of the training is subordinated to the economic ques-

tion of how to provide the salary of the nurse. The important problem before the philanthropic public is how to provide adequate assistance to the sick poor without relegating nursing and midwifery to the status of sweated callings. As it is inadequately trained nurses are frequently employed because no experienced nurse would accept the miserable salary attached to a rural appointment.

### A Maternity Home for Nairobi.

The proposal of the South African Colonisation Society to found a Maternity Home at Nairobi, in British East Africa, where, it is stated, the need for such a home is keenly felt owing to the increase of European settlement, does not commend itself to Lady Piggott, Founder of the Colonial Nursing Association.

Princess Christian, the President, and other officials of the South African Colonisation Society, state that the Government Hospital at Nairobi cannot admit maternity cases, and that the need for a properly equipped Home is urgent, and their scheme has the support of the Earl of Crewe, Secretary of State for the Colonies, and of his Department. Lady Piggott, on the other hand, claims that "the Colonial Nursing Association is called upon by the Colonial Office as the official source to supply nurses for all Government hospitals in the Crown Colonies and British Dependencies, not only in Africa, but all over the globe."

The Colonial Nursing Association is doing most excellent work of Imperial value, but to claim for an unofficial and unincorporated society the monopoly of meeting all the needs of Crown Colonies and British Dependencies, is a claim which cannot be supported, and which no Government Department would make on its own behalf. Moreover, to acknowledge the monopoly of one Association, unless that Association has unlimited funds to meet the needs of the community all over the world, would be to create a dangerous situation, and perhaps to deprive British communities abroad of the assistance which they need.

Lady Piggott maintains that "it does not tend to success abroad when nurses from two distinct and differing sources are working in close proximity in a station." But to take a concrete example in East Africa: in the town of Zanzibar there are not only English, French, and German hospitals, and a hospital maintained by the Zanzibar Government, but there

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