

it. The Act was a good one, and if the rules of the Central Midwives' Board were administered in a uniform and impartial manner throughout the country, the practising midwife would greatly benefit thereby.

The mere fact that the Act had set a standard of training was a big step forward, and apart from its beneficial effects on the mother and child, meant protection for the midwife from much harmful competition.

In all their criticism midwives were anxious to emphasise their full appreciation of what the Act stands for, the first step towards the introduction of order and responsibility in a profession where such important issues were involved. They were to the best of their power carrying out the real intentions of the Act in the spirit in which they were framed.

The framers of the Act took a just attitude towards the women who, though not trained, had a vested interest by virtue of long practice. The National Association stood for the best interests of all midwives on the Roll.

Unfortunately, there was a tendency on the part of those administering the Act—and it was in the administration that the whole trouble arose—to impose the same close supervision on the competent as on the incompetent, to treat all as careless, and never to give the midwife the benefit of any doubt. This supervision was too often carried out by young women and bits of girls, who had themselves little or no training, and often were totally lacking in knowledge of the practical side of midwifery. Yet they were placed in authority over women who had the fullest training permitted by the Central Midwives' Board, and who often by virtue of many years of constant practice had become specialists in the work.

The result was constant friction. Often these women were not free from petty tyranny, and for capable women to be watched closely, as a cat watches a mouse, by people of lesser competence, was galling in the extreme, and a source of constant irritation. Older women, with wider experience, should be appointed to these positions.

In one town in Yorkshire, there was one Supervisor to four midwives; in another, when midwives were directed to take antiseptic baths after doubtful cases, they were required to produce bath tickets to prove that they had done so.

There should be an appeal in cases of hardship, and a practising midwife should have a seat not only on the Central Midwives' Board, but, even more important, on all Local Supervising Committees. Midwives had heavy responsibilities, and all regulations should be reduced to a minimum to leave their minds free to deal with their cases.

In the case of two Lancashire midwives cited to appear before the Central Midwives' Board, and who were exonerated, it cost her Association £30 to defend them. If a working midwife had been on their supervising authority it was improbable that they would ever have been brought before the Board.

Mrs. Lawson also referred to the undercutting of midwives working on their own account by charitable institutions. She further thought institution

life bad, as a rule, for midwives.

Miss Gertrude Marks said that just such women as Mrs. Lawson could and should speak for midwives. The Midwives' Union, which was a young but growing society, was working to obtain direct representation of midwives on the Central Midwives' Board. The speaker also discussed points in regard to the proposed amendment of the Midwives' Act. Others present, who took part in the discussion, were the Hon. Mrs. Charles Egerton, Miss Wooldridge, Miss Elsie Hall, Mrs. Glanville, and others.

Sir Francis Champneys, in a concluding speech, said he was particularly pleased to hear Mrs. Lawson's paper. He reminded midwives that the Act was a protection to them. Some of the regulations might appear vexatious, but they protected midwives as well as their patients. He was not there to answer for the Local Supervising Authorities. He could say that the Central Midwives' Board endeavoured to administer justice without fear or favour, and took immense pains to arrive at the truth.

In regard to the provision of midwives in country districts, Sir Francis suggested that as beds were endowed in hospitals so midwives might be endowed by men of wealth, who were grateful for the restoration of their wives to health by careful nursing.

#### THE PRESENT CONDITION OF MIDWIVES.

Dr. Herman presided at the evening Session, when Mrs. Glanville presented a paper on "The Present Condition of Midwives in England and Elsewhere." The speaker pointed out that although there were some 30,000 midwives on the Roll, only about half of them practised midwifery, and when the *bona-fide* midwives gradually ceased to practise the situation would be much more acute than at present.

#### FRIDAY APRIL 7th.

Dr. G. E. Shuttleworth, who presided on the afternoon of Friday, pointed out that degenerates multiply at a greater rate than those of value to the State, and Dr. Murray Leslie, who presented the first paper,

#### CAN RACE DEGENERATION BE ARRESTED BY EUGENICS?

also emphasised the fact that as a nation we were breeding largely from inferior stock.

The professional marriage rate was half that of the industrial classes. In England and Wales there were 140,000 feeble-minded persons to-day, and 4,800,000 school children unsound in body and mind. No nation could hold its own if the bulk of its citizens were lacking in physical, moral, and mental vigour.

All the great intellects were now employed in endeavouring to solve the problems of nature, and it was a hopeful sign of the times that the prevalence of neurasthenia, which was an indication of reduced vitality and instability, was recognised, and social experts were seeking a remedy.

To an Englishman, the late Sir Francis Galton, belonged the honour of founding a new science, to

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