

would have to be three or four times as large, and the power of the Board to do its work would be crippled. They would also have to take larger offices.

Mr. Parker Young thought that Clause 11 should be included in their representations to the Privy Council, and moved an amendment that it be asked to omit Clause 11, Sub-clause 1, altogether.

The Chairman said that representations on behalf of the Board concerning a number of clauses of the Bill had been made in writing to the Privy Council. He thought that the one dealt with by Sir George Fordham was the most important at the present time, and that they should restrict themselves to that.

Mr. Parker Young's amendment was lost on being put to the vote.

Sir George Fordham's resolution was then carried, Mr. Parker Young dissenting, and it was agreed to represent to the Lord President that Clause 7, if passed, would be highly detrimental to the efficient working of the Act.

Sir George Fordham then nominated the Chairman, himself, and Miss Paget to form the deputation, as representing the three elements on the Board—the medical profession, the laity, and the midwives.

Miss Paget declined nomination as she had supported Mr. Parker Young, and said that Dr. Herman represented the Midwives' Institute.

Dr. Herman was then nominated.

The date of the next meeting of the Board was fixed for February 23rd.

Obstetric Work in Africa.

Miss Helen Hurlburt Stover, writing in the *American Journal of Nursing*, concerning her work in Benguela, Angola, Africa, says:—

"I have been called in for the third stage of labour in three cases. Everything has been tried to induce the natives to call us at time of confinement, but they will not do it. Labour cases are, with rare exceptions, perfectly normal. The women work in the fields until the time of the birth, and in many cases the child is born in the field. The pain is almost nothing in comparison with what our women suffer, and lasts but an hour or two, except in primiparæ.

"I was very curious to see how an obstetrical case was carried on here, and was glad to have my curiosity satisfied in some measure. I was awakened early one morning by a rap at my door, and, on opening it, found a young man, who said, "At my house they want you." I asked what the trouble was at his house. He said his wife had given birth to a child, but something was lacking. I hurried to his house. The patient was in the kitchen, a one-roomed house by itself, and generally used for a lying-in room. The room was small and my first impression was that it was filled to overflowing with women, each one nursing a baby. In the middle of the room was a wood fire with plenty of smoke. The patient, in her wedding clothes, was sitting on a mat, supported from

behind by a woman. In front of her, in a pool of water and blood, on the bare earthen floor, with nothing over him, lay the baby. They do not cut the cord until the placenta comes. It was then five in the morning and, as near as I could find out, the baby was born before midnight, and had been lying there all that time. I expressed the placenta without any trouble by the Crêde method."

My second case was rather interesting for several reasons. I had just returned from a four weeks' visit in one of our out stations; during that time I neither saw a white face nor heard a word of English. While there one morning a man came to say that a messenger had come from a heathen village some distance away to ask for medicine for a sick woman. After some questioning, I learned that the woman had given birth to a still-born child four days before, and the placenta was still retained. I told the man there was no medicine to send, but if they would find me carriers I would go. Our usual mode of conveyance here is a tepoia, which is a hammock swung on a pole and carried by two men. I got together what I had with me in the way of necessary articles and we started. After two hours of rapid travelling—rapid for us—we arrived. I cannot picture to you the dirt and filth of that kitchen. It was my first experience with raw heathen people, and my recollections of Chicago Ghetto dirt faded immediately. I had wondered if the dead baby would be still attached to the cord, but it was not. The room was full of women. I turned out all but three. I tried to express the placenta, but without avail. There was nothing left, apparently, but to take it manually. I scrubbed her up and myself as best I could and proceeded, wondering all the time if I were doing something very wrong. The odour was dreadful and it took all my efforts to keep from vomiting. The placenta came away in little pieces, and I was not sure I had gotten all of it. When I had finished the woman sat up by the fire and said she felt better than she had for the last four days. I told them to send someone for medicine the next day, and to report her condition, but no one came. I learned later, however, that she was better and around again.

It is very uphill work with the natives here, at times I feel that the responsibility is more than I can possibly bear; but this last year I learned that God never increases the burden without increasing the strength to bear it. One cannot depend on the natives doing anything they are told. For that reason I hesitate to give them the treatment for hook-worm, and never do it without fear and trembling until the danger is past. Considering how uncleanly they are and what unwholesome food they eat, they have very little sickness. We could have a number of surgical cases if we had a doctor to operate. As it is, I have attempted a few little things in the way of sewing up bad wounds, and cutting out old ulcers. I am hoping and praying the time will come when we can have a doctor. Only those nurses who have lived in out-of-the-way places, and been compelled to undertake the responsibility of treating serious cases, know the strain involved.

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