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## The Midwife.

## THE STANDARD OF TRAINING FOR MIDWIVES.

The suggestion made, both by Dr. W. E. Fothergill, one of the Board's examiners at Manchester, and Dr. E. Sergeant, County Medical Officer of Health for Lancashire, to the Central Midwives Board, that the standard of training should be lengthened and raised, is one which will commend itself to many midwives; and it is to be hoped that the Board will not defer its consideration till the next revision of the rules.

It may be that it is not considered expedient to increase the term of training in the immediate future for the rank and file of midwives, but at least a higher standard of knowledge, combined with evidence of instruction in teaching, and of ability to teach, could be required of those who are "Approved to sign Forms III. and IV." -a cumbersome designation, which might well be altered to that of "teacher of practical mid-The midwives recognised under this wifery." section form a most important class, and it is not too much to say that the efficiency of the training of those midwives registered under the Act largely depends upon it. The practical details concerning the care of a patient are not taught by medical practitioners, who, for the most part, confine their instructions to the theory of mid-The methods of making abdominal and wifery. whery. The methods of making abdominal and vaginal examinations during the course of labour, of delivering the patient, of nursing lying-in women and their infants during the ten days following labour, have all to be supervised by these "approved" midwives, and it is certain that a three months' training in midwifery is not a sufficient qualification for the adequate per-formance of these during wat nothing more is formance of these duties, yet nothing more is authoritatively required, though the Board, no doubt, discriminates in individual cases. It would unquestionably add to the quality of the instruction given by these midwives, if further experience in midwifery, and ability to teach, were made a *sine-quâ-non* of their recognition. There would further be the incentive to the most intelligent midwives to obtain this higher qualification, and the title of teacher, which, we hope, justice would accord them.

## AN EXCELLENT CHART.

The Nurses' Social Union has issued an excellent printed and coloured chart, on a roller in map form, representing (I) a baby who has dropped his "comforter" in the street; and (2) the "com-forter," much enlarged, showing the germs of

disease which it has annexed during this processdemoniacal-looking microbes, including those of typhoid fever, scarlet fever, chicken-pox, and consumption. The cost of the chart is 3s. 6d.; G. W. Bacon & Co., Ltd., 127, Strand, London, W.C.; and may be obtained from the Central Organiser, N.S.U., The Grange, Kingston, Taunton. It is specially suited for exhibition during a lecture to children on cleanliness, and on the evils resulting from the use of the comforter. A well-known medical man, to whom the chart has been submitted, is of opinion that it should be hung up in every surgery and out-patient department throughout the kingdom.

## THE ADMINISTRATION OF THE MID-WIVES' ACT IN KENT.

<sup>r</sup> The Annual Report of Dr. William J. Howarth, D.P.H., Medical Officer of Health for the County of Kent, contains some interesting information as to the working of the Midwives' Act in that county, from which we learn that, "in addition to the ordinary work of supervision, a serious attempt is being made by the inspectors to improve the practical knowledge of women who are registered, but who have never had the advantage of training; and additional efforts are being put forth to restrain unregistered women from practising otherwise than in emergency. As regards registered, but untrained women, an increasingly high standard of efficiency is now expected. The increase is by no means unreasonable, and is only to the extent which we may expect to be shown by any intelligent woman, who avails herself of the advice given by the inspectors, either at her home or at the lectures which are arranged. Cases of gross neglect are reported to the Central Mid-wives Board. The supervision is not now resented as the women recognise that the requirements are in the interests of the patients, and it is the patients who must receive first consideration. It is, however, not possible for many of the old, untrained women to sufficiently improve their method of practice to justify their being classed as 'safe' midwives, and these women are en-couraged to voluntarily resign their certificates. In a few instances this advice is not accepted, in which event complaint is made to the central authority. The result of the work has been that during the year the number of untrained, but registered women, has declined from 246 to 232. In urban districts this decline has been from 146 to 134, and in rural from 100 to 98. As against their loss, it is satisfactory to report that trained women have increased from 138 to 154, the

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