

open to the charge of offering a premium on artificial feeding. Then we have the experience of the Huddersfield experiment, a system of direct encouragement, one might almost say of bribery, to induce mothers to take a keen or even a selfish interest in the welfare of their babies. Personally I have great belief in the efficacy of prizes, and the stimulus of rivalry, as a means of inducing mothers to do their best for their infants. I very much doubt whether, in my initial efforts to make an Infant Consultation a working success, I should ever have accomplished my purpose without this sordid appeal to self-interest. This system of bribery, combined with home visitation, has, as all the world knows, proved a monumental success in Huddersfield. But as a system it has not proved generally workable in the same way that Infant Consultations have done. The Consultation acts as a material focus at which all interests converge; it is to the health worker an ever-present help in time of trouble, especially in its dealings with refractory cases; it acts as a centre for the dissemination of knowledge, not only to the mothers, but for the health workers also. The Consultation should be quite as much a school for health workers as a school for mothers, and I would go even further and claim that it has become a school for doctors. If I can speak from my own experience, I should say that an Infant Consultation is the only school in which a medical man can gain experience of the feeding of more or less normal infants on a sufficiently large scale to make him familiar with all the emergencies and difficulties with which at one time or another he is certain to be faced.

Some little time since a few of the more energetic workers in this new department of medicine banded themselves into a society for the exchange of experiences and the dissemination of knowledge. The idea was that a central association of this kind might serve as a clearing-house of statistical records, and in the light of its collective wisdom help in the formation of new societies when such were needed. This association, which some eighteen months ago was a very modest concern, is now incorporated with the National League for Physical Education and Improvement, and constitutes one of its most active departments. To this central society are now affiliated some 50 local centres, while a very large number of other societies, although not directly affiliated, regard the central society *in loco parentis*, and appeal to it for advice and instruction. To prove that the Infant Consultation fulfils a genuinely useful function as an instrument for combating infant mortality, I may mention that between the time

of the foundation of the first Infant Consultation in May, 1906, and the time when the first census of such institutions was taken—an interval of four years—no fewer than 89 independent centres were established. A year later there were no fewer than 115, and to-day their number totals 153, exclusive of 14 baby clubs working under the Woman's National Health Association in Ireland. At the present moment our society can scarcely keep pace with the demands that are made upon it for information and assistance in the formation of new units.

The association has drawn up a short list of cardinal rules or principles, which it earnestly commends to the notice of all conducting, or proposing to conduct, Infant Consultations. These have such a direct bearing on what we conceive to be the best lines on which such undertakings should be conducted that I quote them *in extenso* :—

(1) That curative medical treatment, as apart from advice on the ordinary care, feeding, &c., of mothers and infants, does not come within the scope either of the Consultations or of the schools.

(2) That Infant Consultations should form the basis of every school for mothers, and should be aimed at as the basis of all infant visiting and similar associations.

(3) That all Consultations should be conducted by properly qualified medical practitioners.

(4) That no cases should be brought to the Consultations if they are already being attended by their own medical attendant, except by desire of the latter.

(5) That the indiscriminate distribution of printed matter giving instructions for artificial feeding is not to be recommended, and that this form of advice should be given in each individual case by the medical officer at the Consultation.

(6) That all cases should be investigated, to ascertain their suitability from the social and economic point of view before admission to the services of either institution.

Personally, I feel very strongly that the purely medical aspects of this department of pædiatrics—I mean the work of Infant Consultations—should attract men and women of high standing in the profession. In the past there has been a tendency to regard the feeding of infants and the general management of children as work which was not worthy of the highest medical efforts. In Germany this conception has long since been dissipated, and now in Berlin and other large cities there have

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