

work. The reason why midwifery—or at any rate better class and remunerative midwifery—has passed almost entirely into the hands of the medical profession is that it was developed by them upon scientific and therefore safe lines; while the professional education of midwives, if indeed, they had any at all, remained for many years later most elementary. Yet, less than a century ago, the President of the College of Physicians at that time wrote that the practice of midwifery was “an act foreign to the habits of gentlemen of enlarged academic education,” and later a distinguished surgeon told a Select Committee that “it is an imposture to pretend that a medical man is required at a labour.”

Therefore, if midwives receive a thoroughly sound professional training, it seems as if midwifery as a profession for women may once more have a useful future; but midwives with only a three months' training will never recover the ground they have lost. I believe that the large majority of those who prepare pupils for the examination of the Central Midwives' Board would like to see the course lengthened, and consider that the present short term sanctioned necessitates undesirable cramming. But training schools are unwilling on their own initiative to lengthen this term, because the competition for pupils is considerable, and if one school lengthens its training, and consequently has to raise its fees, candidates will probably enter the short term and cheaper schools.

But the Central Board, to whose requirements all the schools have to conform, could easily insist on a longer term of practical work, and it seems to be one of the first duties of a Midwives Board to safeguard the standard of education for midwives, and to ensure that when they are sent out into the world to undertake the grave responsibilities which will inevitably fall to their lot, they shall be thoroughly equipped for them, and shall not be subjected to overstrain, or fail at a critical moment, because of the insufficiency of their practical preparation.

If it is asked what should be the term of training for a midwife I do not think that anything under a year can really be regarded as satisfactory. I will quote an authoritative opinion which none will gainsay, that of Miss Florence Nightingale, who, in 1872, wrote “I call a midwife a woman who has received such a training, scientific and practical, as that she can undertake all cases of parturition, normal and abnormal . . . such a training could not be given in less than two years. . . . No training of six months could enable a woman to be more than a midwifery nurse.” The duties and knowledge required of midwives have certainly not decreased since Miss Nightingale's day. I submit therefore that a just Midwives Act must include justice in regard to educational advantages for midwives.

The next thing to be considered is the composition of the body which governs the midwives, and I claim that no Act is just which does not give to midwives representation on the body which

makes the rules which they are compelled to obey. The composition of the Central Midwives Board in England does not fulfil this fundamental requirement, and we must consider the Act unjust in this respect. As at present composed it consists of four medical practitioners members of medical corporations, and the Midwives Institute, two persons (one a woman) appointed by the Privy Council, one by the Associations of County Council, one by the Queen Victoria's Jubilee Institute for Nurses, and one by the Royal British Nurses' Association. The nominee of the Q.V.J.I. happens to be a midwife, and her services on the Board have been invaluable, but there is no guarantee that her successor will be a midwife, nor should this be left to a chance appointment. I commend to the consideration of Irish midwives that they should bring all the pressure they can to secure the incorporation of direct representation of the midwives themselves on their governing body in any Bill introduced for their control. In the Midwives Bill for Scotland, introduced into the House of Commons in April 1912 by Mr. Barnes, but not proceeded with, provision is made for the appointment of two midwives on the Board to be created by the Privy Council. This is an improvement on the English Act and a recognition of the right of midwives to representation on their governing body, but nothing is the equivalent of the privilege of electing direct representatives.

It should be noted that in a Bill introduced into the House of Lords by the Lord President of the Council, “to amend the Midwives Act, 1902,” in which the reconstitution of the Board was provided for, the Bill, as first introduced, provided that the two members to be appointed by the Incorporated Midwives Institute, and the member appointed by the Royal British Nurses Association must be certified midwives. It is greatly to be regretted that, at the instance of the bodies concerned, this was altered in Committee (on July 26th, 1910), the Midwives Institute preferring to be represented by “two persons, one a midwife,” and the Royal British Nurses Association by a “person.” The Bill did not pass into law, so that there is still opportunity for English midwives to press for the representation the Lord President was willing to grant them.

The next point submitted for your consideration concerns the position given to those from whom midwifery pupils receive their instruction in practical midwifery, and these are almost exclusively midwives. I think you will agree that if midwives fulfil the duties of teachers they should be given the title of teacher, instead of being “recognised for the purpose of signing forms III and IV” as they are at present. Without the efficient aid given by midwives in the practical teaching of pupils the Act would certainly be unworkable, and, consequently, become a dead letter. It is only just that the help they give in this respect should be recognised.

Another very important point is the procedure at penal meetings of the Midwives Board. It appears to me that the Board which sits in a judicial capacity to try wrongdoers and administer

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