

## THE MIDWIVES' INSTITUTE.

### THE ANNUAL MEETING.

The annual meeting of the Midwives' Institute was held on January 12th at the Society of Arts, John Street, Adelphi. The President, Miss Amy Hughes, was in the chair, and there was a large attendance.

The reports on the work of the various committees and sub-committees were first given. After the four following resolutions, sent in to the Council, were placed before the meeting, the first being moved from the chair:—

#### RESOLUTIONS.

1. That the Incorporated Midwives' Institute is strongly opposed to Notification of Pregnancy, because it would tend to prevent early engagement of the doctor or midwife and to undermine the confidence between midwife and patient, so necessary if effective ante-natal care is to be attained.

2. That the Incorporated Midwives' Institute, recognising that pre-natal care is an important factor in diminishing abortions, stillbirths and premature labours, considers the midwife is the suitable person to give this care as under the rules of the C.M.B. she is responsible for the patient from the time of booking.

3. That the Incorporated Midwives' Institute considers that in regard to the improvement of maternal and infantile health an adequate supply of well-trained practising midwives is a national necessity, and it views with much apprehension the tendency to belittle the importance of the midwife's work and responsibilities. We therefore request the Council of the Midwives' Institute to use their best endeavours to discourage the depletion of the ranks of the midwifery profession, due to midwives taking up the less arduous and better paid work of health visitors. We feel that this can only be done by educating public opinion as to the importance of adequate attendance at childbirth, which can only be attained by improving the status of the midwife and insuring that she is sufficiently paid.

4. That the Incorporated Midwives' Institute considers that satisfactory conditions in regard to the health of the mother and infant will only be attained by efficient and hearty co-operation between practising midwives and those maternity centres which recognise that from the time of booking to the end of the puerperium the midwife is responsible to her Authority for the care of mother and child.

I. In the discussion following, the deterrent effect which would result from the adoption of the notification of pregnancy was illustrated from practical experience. A suggestion was made that patients should be encouraged to book at four and a-half months, as was the case in Belgium. Some present spoke of the necessity, with the additional work entailed by efficient ante-natal care, of raising the remuneration of the midwife; others, however, urged strongly that the work

should be done first and, after midwives had proved their ability and willingness to do the work payment for it would inevitably follow.

II. Miss Haydon, in moving this resolution, pointed out that the midwife had the two essentials necessary, the ability and the good will. Midwives had done, and were doing, more in the way of ante-natal care than was often recognised, but an even higher standard was needed. Facilities for securing this were available through excellent lectures, &c., and midwives must take advantage of them. Mrs. Glanville, in seconding it, urged the greater interest a midwife would have in her patients, if they had been under her care during pregnancy, and that midwives alone had the practical experience which would enable them to deal successfully with such problems as the taking of drugs.

III. Miss Duffield, who moved this resolution, urged the importance of thinking *nationally* of this work. Midwives should be willing to serve wherever and whenever they were needed. If this were done the shortage would cease. Miss Elsie Hall, who seconded it, spoke of the need of educating the public as to the importance of the work, and the importance of the skilled attendance on the poor at the time of confinement. We *must* organise, and we *must* train public opinion. If the need were once understood the workers would be forthcoming.

IV. Miss Pearson spoke for this resolution as a sympathiser on both sides. It was all one large question, in which there was neither a midwife's point of view nor a health visitor's, but only the mother's. Co-operation was much talked of, but little understood. The spirit of true co-operation implied only the question "How can *we* co-operate with you?" not "How will *you* co-operate with us?" There was no question that the care of the expectant mother was the midwife's work. With their underpay and overwork, however, midwives had been unable in the past to do all that was necessary; voluntary agencies had therefore stepped in temporarily to fill the gap, though knowing that this part of the work could be only done in a second-rate way. Much good had however been done in drawing attention both to the need of such care and to the need of higher remuneration for the midwife. Miss Marsters seconded this, and gave some account of the scheme which would, it was hoped, be shortly started in the district, whereby the whole of the health work would be divided between the different health workers.

All the resolutions were put to the meeting and adopted unanimously.

A new magazine—"Maternity and Child Welfare"—has made its appearance this month, which contains amongst other items, an interesting paper by Dr John Robertson, B.Sc., Medical Officer of Health for Birmingham, on Maternity and Infant Welfare Work in that city. It is published by John Bale, Sons & Danielsson, Ltd.

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