

The Midwife.

THE PRESENT AND FUTURE POSITION OF THE MIDWIFE.

The Memorandum on the Present and Future Position of the Midwife, presented to the Annual Meeting of the Association for Promoting the Training and Supply of Midwives, by Dr. E. W. Hope, D.Sc., Medical Officer of Health for the City of Liverpool, has now been published in pamphlet form, and will fully repay careful study.

Dr. Hope shows that "a large and increasing proportion of births among the poorer classes—almost three-quarters of the total—are attended by midwives; happily, the vast majority of births take place without any untoward incident, but childbirth, although a perfectly natural process, is, like other natural processes, liable to accidents, perversions and sudden emergencies, most of which are easily remedied or averted if recognized and taken in time, and provided skilled control is available; but they may be destructive to mother and child alike if the necessary skilled assistance is unavailable, or when meddling or ignorant interference is substituted for it. But many of the midwife's patients are under adverse home conditions; and poverty, and all which is implied by privations associated with want of means, add to the responsibilities and difficulties with which the midwife may be confronted.

Dr. Janet M. Campbell (in a Report of the Carnegie United Kingdom Trust) well alludes to "the terrors of midwifery to young midwives unused to its responsibility, anxiety and mental strain," a sentence which sums up this aspect of the position."

The author has "long held the view that the midwife is an essential factor and of fundamental importance in every scheme affecting the welfare of maternity and infancy; her potentialities must be recognized and applied to the best purpose if beneficent schemes of maternal and infant welfare are to have any measure of success." The word "potentialities" is well chosen, for it is certain that midwives, as a class, are capable of much better and more valuable work than has yet been demanded of them, provided that pupils are carefully selected and adequately trained. Most of us could give instances of midwives whose work has attained a standard rendering them of great value to the community, but, as Dr. Hope states, "what we have to insure is the provision of a standard of midwifery skill which will not only safeguard the ordinary normal cases, but will recognize impending or actual danger, meet it by every means available, and we have also to secure the ready help of the expert in the emergencies which render that help necessary." We

cannot yet say that midwives as a class are competent to meet dangerous conditions by every means available.

Beyond her attendance on the mother at the birth of the child, Dr. Hope points out that "the midwife has still further functions and opportunities of the highest importance in reference to ante-natal hygiene, which enhance still further the importance of her position. She has, or can obtain, an intimate and confidential knowledge of the condition and circumstances of her patient; the experiences of any difficulties attending previous confinements are known to her, as also the history of miscarriages, still births, and so forth. She possesses, or can possess, influence with the patient which no one else can possibly acquire; it is, through her, and only through her, that the benefits of ante-natal welfare schemes can be most easily conferred; and it must always be borne in mind that her influence is of the utmost consequence in obtaining treatment for and in dealing with sequela of venereal disease, and in ensuring that a succession of miscarriages and still births shall give place not only to living but healthy children, by persuading the patient to undergo proper treatment.

"It is interesting," says Dr. Hope, "in view of the magnitude of the services which the midwife may render, to consider from what class she is recruited and what it is that induces her to enter upon a calling involving so much work for so little reward. In the first place, there are those with a distinct vocation for midwifery, stimulated, maybe, by the success achieved by the more highly trained and capable practitioners." But the economic position is that "it is hardly possible under existing circumstances for a reasonable living to be earned by midwives. In other words, the unfortunate practitioner, who is liable to be called upon at any hour of the day or night, is, in fact, from year's end to year's end, never entirely free from her exacting and responsible duties, and unless she has some other means of subsistence, has the added financial anxieties of struggle at or below the border line of poverty."

Dr. Hope's conclusions are:—

1. That the efforts of the State to improve the position of the midwife, so far as they have gone, have been rewarded, but they require to go further.

2. That the real demand at the present time is for more practising midwives, all of them trained to the highest plane of the present standard. It is clear that neither of these ends will be achieved unless some means are found which will attract a well educated, good class of practitioner with a sufficiently long and comprehensive training, who will be ensured such remuneration as will free her life from financial worries and anxieties.

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