

Miss Burnside, Inspector of Midwives Hertfordshire C.C., said that in many districts there was not enough to do, and the midwife would not stay long enough. The Health Visitors changed almost as frequently.

The handy woman was allowed to compete unfairly with her. A *bona fide* midwife who had registered complained that if she had known all she would never have paid her 10s. 6d. "Laying out, you knows when you've done with 'em, but lying in you never knows where you are."

The handy woman was a great menace, and certainly ought to be under inspection of some sort. While the midwife was harried with rules and inspection, the handy woman was left to go her own way and made as good, if not a better, living than the midwife.

SUGGESTED IMPROVEMENTS.

Dr. Janet Lane-Clayton's subject was "Suggested improvements for the Midwifery Service." She said that the present conditions of midwifery practice were not sufficiently good to induce the best class of midwife to undertake practice.

There was the need of some form of State subsidy (a) by an increased maternity benefit, with an adequate fee allocated directly to the midwife, (b) State Aid per case through the local authority, or (c) By midwives employed by the local authorities as whole-time officers. Like many of the former speakers she insisted on the right of the free choice of the mother. She felt that the mother should be attended by a trained midwife whether the doctor were present or not.

The services of a trained midwife should be available for persons under a certain income, and also the doctor's fee, should it be necessary to call him in.

AN INTERESTING EXHIBIT.

An interesting exhibit at the Central Hall during Baby Week was the collection of beds, baths, and prams made by Mrs. Tyson Gee. The Ranyard Nurses who had not undertaken a special exhibit of their own, but were helping generally, were looking after this stall. Prominent amongst the exhibits was the Treasure Cot, supplied by the Treasure Cot Co., Ltd., 124, Victoria Street, S.W. An admirable arrangement in this cot, which can easily be packed for travelling, is the ticking case stitched to receive wooden slats transversely. Placed under the mattress it prevents sagging, so that the baby lies on a flat surface.

THE SUPPLY OF PRACTISING MIDWIVES

A meeting to discuss "The best means of increasing the supply of practising Midwives, under the auspices of the Association for Promoting the Training and Supply of Midwives," was held at 34, Queen Anne's Gate, S.W. (by kind permission of Lady Glenconner), on Friday, July 6th. The Lord Balfour of Burleigh presided.

The Chairman said that though some of the speakers would be able to speak with more authority than himself, he claimed to know some-

thing of the subject as he had been responsible for carrying the Midwives Bill through the House of Lords ten or twelve years ago.

The subject before them was linked with that of the preservation of infant life.

They must consider how to prevent the mother in a humble rank of life having to bear more than is put on her by nature.

She was doing her "bit" and bearing her burden for the interest of the community just as much as the munition and other war workers.

Dr. Hope, Medical Officer of Health for Liverpool, spoke on the same lines on which he spoke at the Conference reported on page 30.

Miss Amy Hughes opened the discussion. She said that no doubt the fear of the lack of adequate support kept many educated women out of the profession. The midwife was the one person to influence the mothers, she was in close touch with them, and had an intimate knowledge of their lives. She should be so prepared that she can deal with all practical eventualities. She alluded to the objections of over inspection, and said she knew the women regarded it as a joke to prevent the Health Visitor being informed of any circumstances that would lead up to a visit.

Steps should be taken to save the homes from inspection by so many people.

Mrs. Ebdon, Chairman of the Executive Committee, said an adequate supply of midwives without reasonable remuneration could not be expected. The employment of a Municipal Midwife would prevent the free choice of the mother.

If the midwife were to undertake pre-natal work her remuneration could not possibly be the same. It must be greatly increased if the profession of midwifery was to be raised.

Miss Lucy Robinson, Vice-Chairman, said that the care of the mother cried aloud. Skilful attendance should be obtainable by all. She considered a good midwife was the best solution of the difficulty. They must be thoroughly trained, in greater numbers, and well paid. We sadly needed an Amendment Act.

Colonel Springthorpe, President of the Royal Victorian Trained Nurses' Association, said that in Victoria the district nursing problem was more acute than in England, and that it had always been recognised. He insisted that a woman must be a trained nurse before she specialised as a midwife, and said that to send a woman out after six months' preparation was "bluffing" the whole question. For the Bush Nursing Scheme a first-class training was given, and women were selected who had a missionary spirit. They were guaranteed from £80 to £120 per annum. It was of no use to put an inferior trained woman under those conditions, when, in addition to her nursing capabilities, she would have to specialise in hygiene, cooking and many other things.

In the larger cities the visiting nurses were under local control.

Dr. Arthur Hayes advocated that midwives should work in pairs, and that they should be interchangeable in town and country districts.

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