

# The Midwife.

## PROVISION OF BEDS FOR MATERNITY CASES.

At a meeting of the Section of Obstetrics and Gynæcology of the Royal Society of London, held in London on December 4th in connection with a discussion on the report recently published on the "Teaching of Obstetrics and Gynæcology," Dr. Russell Andrews said that it was the misfortune, not the fault, of the overworked and inadequately paid doctor that his midwifery training was even more inadequate than his fee. A woman in labour would often be safer under the care of a midwife than under that of a doctor.

Sir Robert Morant, who was present, said that the Ministry of Health needed the expert advice of doctors on several very important points. The provision of beds was at present quite haphazard, not at all in proportion to the public need. If the provision was to be systematic in the future, the survey would also have to be systematic, and existing facilities for the accommodation of women in labour would have to be reckoned with. Teaching was very important, but the whole of the existing hospital system would have to be analysed. Some suggested that patients were kept in town unnecessarily long, and that convalescents at an early stage should be moved by motor ambulances to the periphery. The provision of hospitals, where needed, was a huge problem in itself, and was becoming complicated, as regards maternity patients, by the establishment of ante-natal centres. The Ministry of Health was already being asked to provide beds in connection with these centres. Small lying-in hospitals with twenty beds in connection with welfare centres might be more useful in training midwives than students. He thought that a considered scheme on the whole problem of the provision of hospitals was disastrously overdone. London was an especially difficult area to tackle, as its hospital accommodation was under so many different authorities. The Ministry of Health was there to disburse money in connection with the schemes of the local authority, but was also ultimately responsible for the whole Metropolitan area.

Dr. G. F. Blacker considered that a bed should be available for any woman who desired to be confined in a lying-in hospital.

The trouble is that so many married women who would be the better for rest and care in a hospital, are unwilling to leave their homes, where they consider they can keep a general supervision. Over and over again this unwillingness of many expectant mothers to go into hospital, because they do not wish to leave their homes, is met with by maternity nurses and certified midwives. It is quite certain that the good food and continuous nursing received in hospital aid immensely in the

building up of the strength of a lying-in woman, that those who have once had experience of hospital care are aware of this, and if they studied their own welfare, instead of that of their families, they would enter maternity hospitals or homes. The problem is the care of husband and children, and in the mother's interest some satisfactory provision should be available.

## TRAINING OF MIDWIVES.

The Board of Education has notified that the draft, dated September 19th, of the regulations for the training of midwives has been confirmed without amendment, and thus becomes "The Board of Education (Midwives' Training) Regulations, 1919." Copies can be purchased through any bookseller (price 1d.).

## MATERNAL IMPRESSIONS IN NEW MEXICO.

In the November number of *Man* Elsie Clews Parsons gives an account of the customs relating to childbirth as practised in the Indian town of Zuñi, New Mexico, which is summarised in the *Lancet* of Dec. 13th. If a child has a rash it is due to the fact that before its birth the mother tested the heat of her oven by sprinkling bran in it. To cure the rash the mother soaks some bran in water and rubs it over the baby. If the baby has sores, which look like the spots of paint on a mask which the mother has seen worn by the father during her pregnancy, the rash is said to be cured by putting spots of paint on the baby and, at the same time, on the mask, like curing like being a characteristic of Zuñi thought. Marks seen by the mother in her pregnancy may also cause disfigurement in the baby, in which case the father puts on the mask, dances till he sweats, and with his sweat the baby is anointed. If a baby cries a great deal it is because its father sang a great deal before it was born, and for such crying there is no remedy. Other curious beliefs are the changing of the unborn girl into a boy, should a man be present in the lying-in chamber; movements of the foetus on the right side the sign of a girl, and on the left side the sign of a boy; and the swallowing of a bean to produce easy delivery. The idea in the latter case is that just as the bean slips down with ease, so the delivery will be easy.

## VERSE.

### A MOTHER TO HER FIRST-BORN.

Like other babies? Never! In your eyes  
Shine all the glories of last summer's skies;  
From that small face glow all the dawns that were,  
All the shy moons that made my girl's heart stir.  
Your hands are roses, pink like those that he  
Pinned to my breast the night he said to me:  
"I love you!" Mine, oh, mine! To look at you  
Is to have all my dream of love come true.

—Richard Butler Glaesner.

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