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EDITORIAL.

QUEEN'S MESSENGERS.

The fact that two Departmental Committees, appointed by the Minister of Health, are considering: (1) the working of the Midwives Acts, with particular reference to the training of midwives, and the conditions under which they are employed; and (2) the Application to Maternal Mortality and Morbidity of Medical and Surgical Knowledge, affords an opportune occasion for discussing this question from the point of view of Registered Nurses.

There are two principal questions in this connection: (1) What training will best equip women to act as midwives? (2) How are women so trained to be attracted to practise as midwives in sufficient numbers?

Registered Nurses have very definite ideas on both these points, but they feel handicapped in offering to give evidence before the Departmental Committee appointed to investigate these questions because as the Minister of Health has so far refused to nominate a Registered Nurse to serve on this Committee, so that though their views if put forward might be received sympathetically, there would be no one, when these were subsequently under discussion, to interpret them with understanding to the members of the Committee.

To Trained Nurses it appears obvious that the safest and most desirable person as a Midwife is the Registered Nurse who has subsequently added to her qualifications that of Certified Midwife, thus following the example of the Profession of Medicine, who qualify in Medicine, Surgery and Obstetrics. It is sound reasoning that a general education in Nursing should precede that in special branches, and that the prolonged training produces a more competent, and therefore a safer, attendant in childbirth.

Moreover, the actual delivery of the mother, and the attendance on her for a subsequent ten days, as required by the Midwives Acts, forms only part of the duty of the modern Midwife. Ante-natal, and post-natal supervision under medical direction are also demanded, and as Dr. Jameson, Chairman of the annual meeting of the Hastings and St. Leonard's District Nursing and Maternity Association, recently emphatically asserted, wherever maternal mortality is lowest the most complete ante-natal and post-natal supervision is found, and added: "I can tell you that in the future the Ministry are going to insist that every Maternity Home, and every Municipality shall have a consultant Medical Officer."

The proper and most competent person to carry out this threefold attendance under medical supervision is, in our opinion, the Registered-Nurse-Midwife. If she

adds to her qualifications the certificate of a Health Visitor, or a Sanitary Inspector, so much the better, and when public money is spent on subsidising training in Midwifery, or on the salaries of Midwives, when trained, a condition of such an award should, in our opinion, be that the persons so trained, or subsidised, should be Registered Nurses. This, however, is by no means the universal, or even the usual view of the laity, or of some medical practitioners.

How are these highly skilled nurses to be obtained, and retained in sufficient numbers? We are told it is impossible. Nothing is impossible. But here, again, Registered Nurses have their very definite opinions, and in the first place professional nursing work, to be congenial, must be organised and controlled by professional persons.

We, who know the responsible nature of the work of a Midwife, the demand it makes on her intelligence, her skill, her power of endurance, her sympathy, and many other qualities, know that the very best that the Nursing and Midwifery Professions can offer are needed for this high office.

The time appears opportune for the complete re-organisation of the work of Midwives throughout the country, whether as a National Service with a Matron-in-Chief at the Ministry of Health, or under the Queen's Institute of District Nursing. The old bad system of single-handed Midwives serving a wide district, paid salaries which in many instances cannot be considered a living wage, and of expecting them to be on call for the twenty-four hours round is not likely to attract and retain the type desired, and should be completely swept away.

Why should not a new Order arise? A Corps d'Elite of Nurse-Midwives tried and proved, little groups of whom might live together, and in co-operation cover a wide area in these days of quick transport.

Her Majesty the Queen has shown her anxious sympathy for the mothers of the nation, and her sorrow for the many preventible deaths of mothers in childbirth. Why should we not have a Corps to be known as Queen's Messengers, who would go into the homes of the people, as the honoured representatives of Her Majesty, gaining their confidence, acting as Midwives when necessary, and, under medical supervision, doing preventive work amongst the children under school age?

They might form an Order, within the Queen's Institute of Nursing, of Queen's Nurses who had been tested, had added to their qualifications, and proved themselves worthy of this high honour. Nothing could convey more directly to the Mothers of the Nation the Queen's interest in their welfare, and nothing would make such an Order more popular with highly skilled Nurse-Midwives.

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