

for training, in the school of midwifery in Copenhagen. The more she met the Danish midwives, the more she realised the thoroughness of their training. The midwife was still regarded in Denmark as the "Earth Mother," which went back to the time when the midwife did everything for the child from the cradle onwards.

The position of midwife in Denmark was excellent, and was no doubt one reason why candidates for training included daughters of nobles, farmers, and other well-educated girls, from whom a most careful selection was made. When trained they were allotted to districts, and the district or town is required by law to provide the midwife with a furnished house with telephone service, and a car or taxi as necessary.

A minimum salary is defined by the State, and at the end of the year if the fees the midwife has earned do not come up to this, as well as including a sufficient amount to pay for a post-graduate course, the balance is provided by the State. Moreover, if a man dies before a midwife's bill is paid, this is the first claim on his estate.

A midwife in Denmark may retire at sixty years of age, and must do so at sixty-five.

The midwives are under the supervision of the Medical Officer of Health, but this is really nominal. Once a year

The English law did not permit the employment of a woman after the seventh month of pregnancy.

Miss Astrom, President of the Nurses' Association of Finland, said that in Finland conditions resembled those in Denmark. Midwives were registered by the State. Arrangements were made for the care of the mother before the birth of her child, a great deal being done by the welfare workers. Midwives in Finland had a good training, and great opportunities for work.

Miss Agnes Henderson, Superintendent of a Child Welfare Centre in Glasgow, said that there was much poverty and unemployment in Glasgow, and a big birth rate. Unfortunately, the people who were able to support their children were not the ones who had large families. The population of Glasgow was over 1,130,000, and the birth rate in 1926 was 24.345. The infant mortality rate was 104 per thousand.

The Midwives Act for Scotland was passed seven years ago, since which time midwifery had improved tremendously. There were 600 midwives in the city and one supervisor of midwives.

There were 13 Infant Welfare Centres in Glasgow, at which 51 child welfare sessions and 10 ante-natal sessions, were held weekly, also sunlight treatment sessions. In



By courtesy]

[The Canadian Nurse.

#### COMMITTEE ON ARRANGEMENTS, I.C.N. CONGRESS, MONTREAL.

Front row, left to right: Miss Frances Upton, executive secretary; Miss Tasse, representing French-speaking nurses; Miss Mabel F. Hersey, president Canadian Nurses Association and chairman; Miss Margaret Moag, transportation; Miss Esther Beith, registration; Miss Edith Hurley, housing. Back row: Miss Panet Raymond, representing French-speaking nurses; Miss Catherine Ferguson, exhibits; Miss Mabel K. Holt, entertainment; Miss Louise Dickson, secretary; Miss Olga V. Lilly, printing and advertising. Miss Jean Browne, finance, and Miss Ethel Sharpe, publicity, are not in the photograph.

each midwife goes to the town where he resides, takes her bag, goes through her cases with him, probably remains to lunch, in the afternoon attends some social function, and that is the whole inspection.

Miss Beard stated that while she was in Copenhagen there was an "obstetric dinner," and there was evidence of very well-balanced feeling between the obstetric surgeon and the midwife.

Miss E. F. Brownsdon, of the London (England) County Council School Nursing Service, emphasised the great importance of ante-natal care. She spoke from personal knowledge of the work of an Ante-Natal Clinic, and said she was amazed at the results obtained. As an illustration, she mentioned a woman who had had six pregnancies but no living child. She put herself under this Clinic for supervision and advice, and the result was that, owing to care given to her, her seventh child was a living one.

In England the midwife attended the patient, in a normal case, up to the tenth day; after that the Health Visitor took over the care of the mother and child, who passed on to the Welfare Centre.

addition, there were five day nurseries, one kindergarten school, three hospitals for ailing babies, and one home for mothers, besides maternity hospitals.

Classes were held in infant hygiene, and to teach mother to sew.

There were 70 Health Visitors, Tuberculosis Visitors and assistant sanitary inspectors, the Health Visitors doing child welfare work only. It was sometimes said that the poor did not wish to be educated—that was not so; but people were needed for the work who would be friends of the people.

Miss Mitchell, Matron of the Cape Town Mothercraft Training Centre, South Africa, said that maternal care meant both ante-natal and post-natal care; the former was the more important and needed strict attention. If the mother received certain care while carrying her child, both mother and child would enjoy better health. The training of midwives in South Africa is for twelve months, or six months for the general trained nurse.

We must, said Miss Mitchell, combine to ensure that the training is good, so that the death rate may be lowered;

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