

The Midwife.

REPORT OF THE JOINT COUNCIL OF MIDWIFERY ON THE DESIRABILITY OF ESTABLISHING A SALARIED SERVICE OF MIDWIVES.

It will be remembered that the "Joint Council of Midwifery," as announced in our issue of February, 1934, was formed at the instance of the National Birthday Trust Fund, on January 16th of last year, with Major-General the Rt. Hon. the Earl of Athlone, K.G., P.C., President of the Queen's Institute of District Nursing, as Chairman, the Lord Aberdare and Sir Francis Fremantle, O.B.E., M.P., as Vice-Chairmen, and representatives of the British College of Obstetricians and Gynaecologists, the Association of County Medical Officers of Health, the Society of Medical Officers of Health, the British Medical Association, the Association of Inspectors of Midwives, the Midwives' Institute, the Queen's Institute of District Nursing, the College of Nursing, the National Birthday Trust Fund, the British Hospitals' Association, and four independent members.

Subsequently the Joint Council appointed from its members a Midwifery Services Committee under the Chairmanship of Dr. Watts Eden, by which the Report under discussion was prepared.

Terms of Reference.

The Terms of Reference to the Committee were:—"The Council is of opinion that further consideration of the whole question of the remuneration of midwives, as bearing on the efficiency of the midwifery service, is urgently required, and that a detailed scheme should be prepared for the enlistment of midwives throughout the country in an organised service, suited to the needs of each district, and having due regard to the retention of the mother's freedom of choice of attendant."

The Report was issued on February 21st.

PART I.

Part I. consists of a Review of present conditions and consideration of alternative proposals for improving the midwifery services, and the view is expressed that "a well trained, well informed, and intelligent service of midwives working in co-operation with the Medical profession is of premier importance in any scheme for the reduction of maternal mortality and morbidity."

Recommendations in Previous Reports.

The Joint Council refers to Reports by various bodies which are unanimous in expressing the view that a National Maternity Scheme is urgently required, and there is also agreement upon the following points:—

That domiciliary midwifery should continue to form the basis of the maternity service.

That the *nursing* of every maternity case in which a medical practitioner is engaged should be conducted by a qualified midwife.

That the status and remuneration of midwives should be substantially improved.

That the training of midwives must be lengthened, improved and standardised.

That compulsory post-certificate courses are essential.

That the general supervision of midwives should be carried out by senior members of their own profession.

Domiciliary Midwifery.

The Committee concurs with the views expressed in the Reports that, although adequate hospital accommodation

for ante-natal cases and for abnormal labours, is essential, normal confinements, where the conditions are suitable, can be satisfactorily and safely conducted in the patient's own home.

It is of opinion that it should be clearly understood that a reduction in maternal mortality will not be secured merely by increasing the hospital provision for normal cases.

Nursing Care in Maternity Cases.

The Midwifery Services Committee expresses the view incorporated in the Report of the Joint Council of Midwifery, that "the nursing of every maternity case should be conducted by a qualified midwife, and *recommends that legislation should be introduced to ensure that unqualified persons should not be permitted to 'attend women in childbirth for gain,' whether or not such attendance be under the supervision of a medical practitioner*" [The italics are ours].

It continues: "Since skilled nursing care cannot be given by the doctor, and is essential throughout the puerperium in every case, it is clear that if the above provision is not made the nursing of the patient must suffer. . . . Considering that the services of a midwife are essential to every maternity patient, the Committee is of opinion that it should be the duty of the Local Authority to provide that midwives should be made available to act as maternity nurses in the case of any patient who has engaged a doctor for her confinement but who is unable in addition to afford the services of a trained nursing attendant."

Status and Remuneration of Midwives.

The Report then discusses the Status and Remuneration of Midwives, and computes the average earnings of a midwife dependent upon her profession at the present time at £80 a year, and in certain areas as low as £50. "When it is remembered that out of this meagre sum the midwife is expected to provide equipment, necessary drugs and disinfectants, and even in some cases dressings, for her patients, the inadequacy of the payment of those engaged in this most important work is still more marked. There is evidence that the low standard of comfort and cleanliness obtaining in the houses or lodgings occupied by midwives in certain areas to-day militates against the maintenance of a high standard of professional work, particularly where ante-natal examinations have to be undertaken in unsuitable rooms normally utilised for other purposes, or where sanitary arrangements are inadequate for the midwives' requirements."

Causes of Low Remuneration.

The main causes of the low remuneration of midwives are stated to be:—

(a) The economic position of those persons in the community who principally employ midwives.

(b) The part-time practice carried on by large numbers of midwives as an aid to another source of income.

(c) The excessive number of midwives qualified arising from the shortness of the present period of training.

Advantages of an Organised Service.

The Committee believes that the institution of an organised service throughout the country would result in a great improvement in domiciliary midwifery, co-ordination with other members of the public services, scope for promotion, pensions, improved training, and payment of the midwife's fee in necessitous cases.

The continuation in practice of women over 70 and even 80 years of age which occurs to-day is, the Committee says, a serious blot on the present system.

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