

# The Midwife.

## KERNELS FROM CORRESPONDENCE.

### Humans Need Bracing Up.

*Army Sister* writes: "For a soldier to see himself as a smart fellow is a necessity—and springs from a sense of honour for his corps—the Fighting Forces and his country. How is it possible for the average soldier to feel inspired in the hideous baggy garments he is now compelled to wear? Comfort no doubt, but physical comfort is not everything; it is good for humans to be braced up. Note in processions the acclaim of the mob as the kilted companies swirl by. The troops are not to blame, they have little to inspire them."

[We sympathise with this view. A soldier should be a smart man. See W.R.N.S. in new hats on page 61. They look fit for any emergency.—Ed.]

### "Give Us the Humanities."

"*Disappointed*" writes: "Why is it we hear so much of Student Nurses and so little of the patients? Surely a nurse is, after all, of secondary importance in the hospital regime, and it is, or should be, the patients who should command the limelight, instead of being as they often are, just a ward fitting. We must get back to the humanities if, as probationers, we are to love our work, which really is of all-absorbing interest; and, moreover, human beings are far more interesting and instructive than books and plaster-casts."

### Red, White and Blue.

A *Registered Nurse* writes: "Our National Colours are being speedily used up in decorating untrained women—Red stars for Auxiliaries, and shortly blue stars for Assistant Nurses. It is to be hoped Registered Nurses will not be plastered with dabs of white. What degree of patriotism does the Ministry of Health expect from the Civil Nursing Reserve? Cannot these highly paid untrained women be secured without labels? The only advantage apparent is that the Reds and the Blues can now be distinguished for what they are—and not pose as trained nurses. The waste of money in supplying these fripperies should be prohibited. I don't mind paying through the nose for income-tax for the country's benefit, but foolish waste should be strictly prohibited. It would be interesting to Registered Nurses to know what stars, advertising, cost of Central Hall, Westminster, etc., amounted to. It is the same in other women's services. Why need clerical workers, typists, etc., wear khaki? And why not reduce the thousands of brass buttons worn by all and sundry. Silly vanity, that is all there is to it. The women are sound enough if politicians ceased patronising them and advertising themselves."

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### THE PRIZE COMPETITION.

We regret that no Prize Paper of sufficient merit has been received for publication.

### PRIZE COMPETITION QUESTION FOR MAY.

Describe briefly the methods by which bleeding can be arrested, and give examples.

## THE CENTRAL MIDWIVES BOARD.

Second Examination, March, 1942. List of successful candidates:—

CANDIDATES EXAMINED.				
<i>First Entries</i>	...	...	...	319
Passed	...	...	...	277
Percentage of failures	...	...	...	13.1
<i>Re-entries</i>	...	...	...	51
Passed	...	...	...	42
Percentage of failures	...	...	...	17.6

We are glad to note that 319 skilled midwives have been qualified, and hope the majority intend to practise, as their skilled service is of great value to the country.

### MOTHERS AND CHILDREN.

In the Summary Report by the Ministry of Health, up until March, 1941, we learn of another danger of war.

In the Ministry's last Annual Report it was possible to indicate material progress in the maternity and child welfare services. Two years of war, and the unavoidable dislocation of family life that war brings, have forced all concerned with these services to concentrate on maintenance rather than development. Yet progress can still be recorded.

### Maternal Mortality.

The fall in the maternal mortality rate which began in 1934 has continued, and the figure of 2.61 per 1,000 total births in 1940 is the lowest ever recorded. Various factors have contributed to this decline, notably the advances made in recent years in the treatment of sepsis. Some of the credit is undoubtedly due to the improved standard of domiciliary midwifery, and here a tribute must be paid to the devotion to duty shown by the practising midwives, who, it must be remembered, are in attendance at 90 per cent. of the births in this country, and in sole charge at 65 per cent. Their services have been needed not only for regular domiciliary work, which has often grown in volume because of a dispersed population, but also for work in the Emergency Maternity Homes. For this reason, and in view of the possibility of a shortage, a Defence Regulation was made in 1939 which enabled a Local Authority to bring back into work temporarily a midwife who had surrendered her certificate under Section 5 (1) of the Midwives Act, 1936.

When the intensive bombing of London began it was recognised that persons in charge of air-raid shelters might be confronted with cases of women taken suddenly in labour and have no experience which would help them to deal with such an emergency. Two leaflets of simple instructions were issued, their main object being to give advice on the care of the mother and child if no expert could be fetched in time, and to prevent untrained people from interfering more than was absolutely necessary.

### Infant Mortality.

The fall in infant mortality has, unfortunately, suffered a check. In 1939 it fell to 50 per 1,000 live births, a further three points below the record of 1938, but in 1940 it rose again to 56. Yet, taken in perspective, these figures are in themselves evidence of the great improvements made in maternity and child welfare services between the two wars. In the second year of the war of 1914-1918, the infant mortality rate was 110.

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