SOME ASPECTS OF THE MIDWIVES ACT OF 1902.

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ABSTRACT.

THE Midwives Act of 1902 has been the subject of much criticism; but the public as a whole have hardly realised either its usefulness or the immense possibilities it opens up to a well-organised local authority.

The poorer working classes of this country are rarely in a position to afford skilled medical attendance at child-birth, this being especially the case in the slums of our large cities, where so many of the inhabitants live habitually near the poverty line, and on the slightest accident fall below it.

A large proportion of wage earners are unskilled labourers, their weekly income averaging about 18s. When one remembers that in the winter this wage is subject to reductions, and that many families last season were subsisting on 8s. per week, it is not difficult to realise that the wives of such workers are unable to pay heavy fees for attendance at the time of confinement.

But recently in one of the poorest districts of Bradford, a woman was confined of twins, the husband, a hard working man, bearing an excellent character was out of work. On entering the home, I found the mother in a very exhausted condition, being on *water* gruel, and that not of a proper consistency. Such a circumstance is of no uncommon occurrence, yet the lives of poor women are as equally precious to their husbands and children as those of their wealthier sisters, and the Midwives Act of 1902 will prove an immense boon to them, ensuring skilled attendance in child-birth.

This Act prohibits any woman *not* certified under it from using the *title* of midwife, and arranges until April, 1905, for the certification of women already in practice.

After April, 1910, however, no woman may practise without the certificate of the Central Midwives Board.

The Central Midwives Board has been formed to arrange examina-

tions, and make regulations for the guidance of midwives and the local authority. And it becomes the duty of the local authority to enforce those rules, reporting any infringement of the same to the Central Midwives Board.

Many of the existing certified midwives are extremely ignorant, many being unable even to write. The local authority is, however, now authorised to supervise such women, and a superintendent is usually appointed to inspect the midwives in each district. That this superintendence was urgently required is proved by the conditions revealed.

The ignorance of the *present* midwives is a problem that all local authorities require to face. Some remedy is necessary; and besides appointing a superintendent to inspect and instruct them, it appears necessary that lectures by medical men should be given to them on general hygiene and infant feeding.

The problem of infant mortality is ever before us, and doubtless a staff of properly trained midwives might do much towards spreading knowledge on health subjects.

In Bradford alone there are 101 midwives, 71 being certified; these women come daily into touch with the poorer classes of the city, and were they to receive a course of lectures on the above subjects, the prevailing high rate of deaths among infants might be much more successfully combated.

District visitors and those societies taking an interest in the poor might obtain a list of qualified midwives from the superintendent, and advise those they visit as to the women they employ at their confinement.

In Bradford I recently adopted the plan of writing an article on infant mortality in the monthly magazine of the "City Guild of Help," supplying that society with a list of satisfactory women, for it is only by co-operation in matters affecting the public health that true progress will ever be attained.