THE PROPRIETY OF ESTABLISHING A FEMALE COLLEGE OF MIDWIFERY.

In the history of the medical profession nothing is more remarkable than the energy and perseverance with which the several branches have exerted themselves to secure special privileges for the practice of medicine and surgery, and the total neglect with which they have treated the practice of midwifery.

Formerly, in the sixteenth century, the universities alone gave degrees in medicine, and the title M.D. was rather an honorary distinction than an authority to practise medicine; at that time anyone could do so, but through the exertions of the great Linacre, an M.D., and a Fellow of the University, a charter was granted in 1518 by Henry VIII. to form a college distinct from the university. It gave the college the exclusive right to license all medical practitioners in London and within seven miles of it. The term "medical practitioner," included the physician, surgeon, oculist, and dentist, over whom the new college, called the College of Physicians, had complete control. The college considered itself a part of the university, and therefore required that all candidates for their licence should be graduates of Oxford or Cambridge. At the same time they readily admitted graduates from the foreign universities—as Leyden, Utrecht, Bologna, Padua—provided they went, *ad eundem*, to an English university, which was then an easy process. In the reign of Charles II., however, this privilege was withdrawn. Sir George Wakeman, the queen's physician, was accused by Titus Oates of the design of poisoning the king, and, although acquitted, the College of Physicians determined to admit no foreign graduate in future, Sir George being one. Their licentiates were confined exclusively to the graduates of Oxford and Cambridge.

This law was strictly adhered to for more than 150 years, and, consequently, limited the number of physicians very much.

The College of Physicians confined their attention solely to the practice of medicine; they disregarded surgery and pharmacy, and as for midwifery, they, in every manner, discouraged the practice. Any physician practising it was not allowed to be a censor, he was not even called a physician, but only a man-midwife. This branch of practice was left entirely to the midwife, who received no education for the purpose.

The College of Surgeons began by forming, in 1704, a benevolent society for the improvement of chirurgery, and succeeded, in 1745, in separating from the Guild of Barbers, and forming themselves into a

distinct corporation. This obtained a charter, and was named the College of Surgeons.

The college was especially intended to license those who wished to practise surgery. They had no power to prevent anyone from practising who pleased, but it was not a branch of the profession which everyone could safely practise, and, therefore, it was important that the public should have some means of knowing who were capable. This the college intended to accomplish, and the eminent men who became members of that body raised it to the highest estimation with the public. Cheselden was its founder, John Hunter was his pupil, and after him Clive, Abernethy, Sir A. Cooper, Travers, Brodie, Liston, and others followed, whose high professional reputation was reflected on the college. Its position was established, but the principle they maintained was to confine their qualifications exclusively to the practice of surgery. They left medicine to the College of Physicians, pharmacy to the Society of Apothecaries, and midwifery they neglected altogether; they would not allow it to be a branch of surgery, and discouraged any member who professed to practise it. He was not allowed to be a member of council, and; therefore, no candidate for their licence could be examined in midwifery. The consequence was that midwifery was left completely to the midwives, who, as has been stated, received no instruction to guide them in its practice. The result of this neglect was that the practice of midwifery was left to women who were grossly ignorant, and many of them given to low habits.

The consequences to the public became so serious that the Society of Apothecaries interfered, and when they obtained the Act of 1815, enabling them to examine candidates in the practice of medicine, they also examined them in the practice of midwifery. Thus those qualified by that society proved that they could practise, not only medicine and pharmacy, but also midwifery. It was only necessary to obtain the diploma of the College of Surgeons to constitute them "general practitioners."

These gentlemen, so qualified, gradually superseded the midwife, and are now the principal practitioners in midwifery.

While thus midwifery was discouraged by the colleges of physicians and surgeons, and only recognised by the Society of Apothecaries within the last 50 years, the public used every effort to have the midwife instructed. The City of London Hospital was founded especially for that purpose, as may be seen on the walls of that building. The Queen Charlotte Hospital was founded by the queen of George III. with a similar object. The Great Maternity Charity to the present day employs midwives in attendance on cases of labour. The Middlesex Hospital does the same.

There is every opportunity given for the practice of midwifery, but

none whatever for education. Thus, although the public were most anxious to have the midwife properly instructed, yet their efforts failed, because there was no college chartered for the purpose of educating and licensing them in the same manner as the colleges of physicians and surgeons. From the earliest times to the present day there was nothing to prevent any woman who pleased from practising midwifery; a costermonger's wife or an apple-woman could do so as well as a lady with the best and most scientific education.

It is the object of the Female Medical Society to correct this great neglect. It wishes to have such women as wish to practise midwifery properly instructed for the purpose, and to obtain for them, if possible, an authorised examination and diploma, so that the public may know the educated from the ignorant. If, further, by the same authority, no woman be allowed to practise midwifery unless she possesses such a licence, a great benefit would result in excluding the ignorant from practice.

There is no doubt that if the Female Medical Society were successful, and could prove that many ladies of intelligence and education were anxious to study and to practise midwifery, provided they were properly protected, Her Most Gracious Majesty would willingly grant them a charter, and establish a college of midwifery.

At the present day there is a strong desire to improve female education, so as to prevent ladies being compelled to depend on their needle, or merely routine teaching, as a means of support. There is now a society established especially for the employment of women,* giving them instruction so that they can act as telegraph clerks, as law clerks, as photographers. In France they are employed in many public offices, and in railways, and are found to be most excellent accountants. We have here, also, evidence that Lord Lytton; Charles Dickens, and Wilkie Collins, have rivals among ladies in the popular novels of the day; and, more than this, we have also proof that their ability is not displayed merely in literature, but is shown also in scientific subjects We have Mrs. Somerville rivalling La Place in astronomical researches, and Harriet Martineau taking a like position in political economy.

Of their ability, not only for private, but for public duties, there can be no dispute; but of all the duties in which she can take an interest, that which concerns herself as a mother stands first. The formation and birth of her child, its proper management afterwards, a knowledge of its diseases, and of those maladies which render many a female life miserable—all these subjects have for a lady of education a far deeper, a more personal interest than the graces of the pen, the calculations of

* 19, Langham Place, Regent Street.

the desk, or other public duties. When they have proved their capability and excellence in other departments, there is no reason why they should not excel here. It is only necessary that a proper inducement should be held out to them to study midwifery, and when they have done so, to secure to them the same privileges in its practice as is now possessed by the physicians, surgeons, and apothecaries in other departments.

Hitherto the skill of the midwife, or the nurse, has been a mere matter of chance. Those who succeeded, did so, generally, through private interest, the public had no other means of judging; but, so far as nurses are concerned, Miss Nightingale has set a noble example, which has been followed by several public institutions, which are now established for the purpose of instructing nurses to attend, not only in private, but in hospitals, and they are found to be a great improvement on the former system.

When such an advance is made in the education of nurses, and an effort is now made to give a proper education to those ladies who wish to practise midwifery, why should they be deprived of an efficient mode of testifying their ability? If the public support the efforts of the Female Medical Society, by doing so they will form a foundation upon which a super-structure may be raised to carry out this principle, and establish their original intention—the proper instruction of midwives.

We have evidence, in France and Germany, to prove what women there can do in the practice of midwifery; and there is no reason to suppose that, if proper education and opportunity were given in this country to those ladies who wish to study it, they might not attain to an equal eminence. We might then have here the rivals of Mesdames La Chapelle and Boivin, whose works on midwifery and the diseases of women have long been standard works in France.

If it be admitted that the practice of midwifery, both in England and elsewhere, had been, originally, conducted by midwives, who, notwithstanding the exertions of the public, received no education, could obtain no diploma, and had no exclusive authority to practise midwifery.

If, further, it appears that both the practice of medicine and surgery have each been protected by charter, and that colleges of physicians and surgeons have been established for the purpose of granting licenses to practise medicine and surgery.

If again we find that these colleges not only did not recognise midwifery as a subject for examination, but in every manner discouraged those gentleman who studied and wished to practise it.

And if, lastly, we perceive that a society is established for the purpose of promoting the employment of *educated* women in the practice

of midwifery and the treatment of the diseases of women and children.

The natural conclusion we draw from the above facts is, that such a society should be assisted and recognised; and, if Her Majesty would establish it by charter, so that properly-educated women could have public recognition, by diploma, of their competency in midwifery, a great benefit would be conferred on the public, and the character of the midwife would be raised from its present degraded position to one of respectability.